Reviewer’s report

Title: Factors associated with type of footwear worn inside the house: a cross-sectional study

Version: 0 Date: 25 Jun 2019

Reviewer: Anna Hatton

Reviewer’s report:

This was a well-written article, and a pleasure to review. I commend the authors' work, as the exploration of footwear behaviour is an important factor to consider for many clinical populations. There are several areas where I felt the article could be enhanced for clarity and readability:

Introduction:

* Line 66: "…risk of developing falls or foot ulcers…” Suggest that the authors re-phrase this sentence to indicate "….risk of experiencing falls or developing foot ulcers…”

* Lines 70-72: The authors raise a very valid point that differences in the choice of indoor and outdoor footwear can be influenced by several factors - e.g. "aesthetics less important; comfort more important." However, what is not clear is the comparison - for example, comfort is more important for which type of footwear indoor or outdoor? I recommend that the authors review this sentence for clarity.

* Line 76: Please remove the hyphen from "at-risk"

* Line 81: Please review to avoid using the phrase "don't wear them" - and use more formal terminology (e.g. ….those who have been prescribed footwear to prevent foot ulceration often fail to wear their recommended shoes within the home.)

* Lines 83-92: The paper aims to investigate the indoor footwear types worn most often in the year prior to hospitalisation. Whilst this is an important and timely topic to address, it would be useful to provide the reader with greater information about why this period of data collection (i.e. the year prior to hospitalisation) is useful for clinicians etc. This point needs stronger justification of its relevance.

Methods:

* Line 103: The authors describe several characteristics of the study sample - all of which are highly relevant. Whilst the majority of the characteristics listed concern sociodemographic factors, one medical factor (diabetes) is also listed. This seems somewhat out of place, and it is
unclear why the authors would select this one medical condition, given it was not the specific focus/target population of the paper?

* Line 107-108: "Trained data collectors" - were these people research assistants, clinicians, students, any of the authors listed?

* Line 108: Please provide further, albeit brief, details about the "validated data collection form"

* Line 115: Were the trained data collectors qualified to provide a diagnosis of foot conditions? Was it their responsibility to provide a "new" diagnosis, or simply to confirm an existing diagnosis (previously made by a health care professional)? If the latter is correct, then I suggest the authors consider revising the terminology used in this sentence. On this, what happened to the participants once they were given a new diagnosis? Were they referred for subsequent assessment/management to a relevant health care professional?

* Line 119: Please can the authors provide a reference to the accepted criteria they used to diagnose the presence of peripheral neuropathy.

* Line 128: Participants were shown a footwear picture chart, to help determine which footwear was worn most in the house. Specifically, participants were asked "what is the one type of shoe you have worn most". Given that there were options for 'barefoot' and 'socks only', was this question not modified to account for shod and unshod conditions?

* Lines 132-135: From a readability perspective, this is a difficult sentence to digest (with the term 'footwear' repeated 7 times). I suggest the authors review this sentence.

* Line 141: Recommend that the authors also include the term 'flip flops' as an alternative interpretation of 'thongs', to cater for an international readership.

Results:

* Line 165: As above. Recommend that the authors also include the term 'flip flops' as an alternative interpretation of 'thongs'.

* Line 184-185: Rather than using the phrase "year 10 education levels" can I suggest that the authors state "educated above Year 10 level" or something similar, to enhance readability.

Discussion:

* Lines 244-253: The authors discuss their findings of independent associations with wearing protective footwear - specifically education level and previous foot care. Whilst there is further in-depth discussion around the latter variable (i.e. foot care), there is no comment on the participants' education level. I recommend the authors pay equal attention to both findings within their interpretation of the findings. It may be opportune to consider whether more or less
educated people benefit from "education" delivered by health care professionals, and their likelihood to act upon this education?

* Lines 261-263: For what reasons would people following a stroke, or who had been diagnosed with Parkinson's disease, change their indoor footwear to be more supportive? Please can the authors elaborate on this rationale - which I suspect may centre on (in part) impaired balance and gait control?

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An article of importance in its field

**Quality of written English**
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Acceptable

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