Reviewer's report

Title: A cluster randomised feasibility trial evaluating nutritional interventions in the treatment of malnutrition in care home-dwelling adults

Version: 2 Date: 5 August 2015

Reviewer: Catherine Hankey

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Major points
This work was carried out in community care home settings, that were already involved with the dietetics service. It may be that the uptake, did the 6 sites all agree straight away?, was of little value as the homes had already been co-operating with the dietetic service? How many did you approach? You have discussed this issue but it really devalues your aim to look at uptake and am not sure the pilot would help you out in this respect. This seems a flaw and I am not sure it gives you any information to use in the design of a full study.

It may be that the catering provision in the homes was inadequate, was there any assessment of this prior to the intervention? This seems crucial. If not why not?

The estimates of BMI, were recorded by the care staff, as part of their on-going MUST measures. However, what confidence do you have that they recorded weight and height correctly? This is key to identification of those who are under nourished. Many people would be unable to stand up straight or at all to have their height measures made. I see the scales were chair scales and the same ones. Were they calibrated?

This is a very challenging area of work. As this is a feasibility study it would be very useful if the details of the intervention concerning food could be explained in more detail. How did you decide on it. This is also very important, as the care homes need to be able to deliver this easily. Was it expensive? Table 1 seems to list quite a labour intensive group of options. How did they fit to the existing menu? Were they costly?

According to your table 4 success criteria point 4, how can you state whether or not this was achieved? How was it assessed. Or was it purely a weight outcome? Or did you use the food diaries? How did you find out whether these were largely filled out correctly? As you state the researcher was unable to be there? Real world settings mean that you are never going to be sure of the intakes. So why use these at all here?

You state in the acceptability of the interventions that there was a 60% compliance with ONS and FB. However, can you estimate whether this has any relation to weight changes observed?
The possible cost savings from the interventions and how to measure them are discussed in health care resource usage. However, how much would the food based and ONS have cost. This information would be really useful, and the authors should estimate this. Appreciate that the ONS was a gift for the study.

The use of the EQ5D-5L, the visual appetite scale and the COOP QOL require quite a lot of awareness. Many of your subjects had dementia and the like. Are they feasible to complete?

Table 6 details of the group is missing from the table
Figure 1 is not a figure but text? It should be a figure.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:
I declare that I have no competing interests