Reviewer’s report

Title: Balance Right in Multiple Sclerosis (BRiMS): A guided self-management programme to reduce falls and improve quality of life, balance and mobility in people with secondary progressive multiple sclerosis: a protocol for a feasibility randomised controlled trial

Version: 0 Date: 28 Mar 2017

Reviewer: Margarita Corry

Reviewer’s report:

This protocol adheres to best practice guidelines for the conduct and reporting of feasibility studies and the researchers have provided clear criteria for determining progression to a full trial.

The background section provides good justification for the study.

Just a few points to consider:

Line 120 - I suggest remove the word 'recent' and just write "....... given evidence that........" The meaning of the word recent will change with time and the work referenced is 2014, which reported on data up to 2010, so it's not that recent per se.

Line 274-274 - Identifying when these one-to-one session occur would be helpful eg. one at the start of the intervention and one xxx? I think I worked this out from Figure 2 but it's not explicit

Line 315 - I'm not clear as to what assessments will be done at baseline. I presume all assessments listed under primary and secondary outcomes will be conducted? Might be good to make this clear for the reader.

Line 318 - Can you provide a justification for the outcome timings i.e. why 15 weeks and 27 weeks? What if there's a delay to the start of the intervention? Then 15 and 27 weeks might not correlate with 15 and 27 weeks following commencement of the intervention?

Line 280: I note there is a link to the web based physio site in line 299. It would be helpful to the reader to have a link to the overview of the intervention site around line 280 under the intervention section.

Line 300, usual care - are the therapists the same or different to the ones providing the intervention? What is risk of contamination? If they are the same treating therapists then how will risk of contamination be minimised?

Line 343 - Adherence will be measured by the number of web-based log-in sessions - does this include a measure of length of time the person logged in for and how much of the session they completed. It might be worth clarifying this as participants could just log in and not complete
the session. How will you measure this? I assume the online exercise diary is separate to or linked to the session?

Line 377 - Safety monitoring. You need to specify what might constitute an adverse event in this intervention. Would a worsening of the participant's condition be considered an adverse event? How will you determine whether an adverse event is due to the intervention or deterioration in the person's condition?

Line 419: The detail on the qualitative data analysis is scant and would benefit from a little more detail eg. Reference to quality and rigor in analysis. What coding framework will be used, how rigor will be demonstrated, such as trustworthiness and credibility etc.

Line 504 - typo chaire should read chair

Line 507: Ethics: I think it would be good to cross reference to the declarations section or indicate that ethical approval has been granted in the main body of the text.

Line 561 Trial status: this needs to be updated at time of publication. Perhaps change it to when trial recruitment commenced?

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An article of importance in its field

**Quality of written English**
Please indicate the quality of language in the manuscript:

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