Author’s response to reviews

Title: A method for co-creation of an evidence-based patient workbook to address alcohol use when quitting smoking in primary care: A case study.

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Author’s response to reviews:

Dear Ms. Staniszewska and Mr. Stephens,

Thank you for your consideration of our manuscript “A method for co-creation of an evidence-based patient workbook to address alcohol use when quitting smoking in primary care: A case study” for consideration for publication in BioMed Central Research Involvement and Engagement. We appreciate the reviewers’ time to evaluate our paper and specific responses can be found below.

Sincerely,

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The authors organized a single event that involved 14 common citizens, who were in possession of the criteria defined by this study, in order to gather and organize patient perspectives and suggestions, starting from some existing publications, to create a workbook for other patients participating in a clinical trial.

Inclusion of patients in research is one of the most fervent issues of recent years, but while inclusion of patients in all major aspects of planning and evaluating of clinical trials requires the identification and training of so-called "Expert Patients", it is very important to involve the patient's vision in all subsidiary activities and in information materials that are intended for clinical trial participants, to ensure that the study achieve their goal better.

In particular, I feel very encouraging the experience described in this case-study, properly defined in methods and in its intended purpose.

Almost all of his limitations and weaknesses were already listed and analyzed by the authors. Probably the workbook would have been more complete and (maybe) more effective if there was a slightly larger number of participants in the event, because the number of 14 participants may still lead to bias due (for example) to the more communicative or persuasive ability of some participants, who could give more emphasis to their opinions, especially in working in small groups.

In addition, I would like to know if the authors hypothesized to have the presence among the discussants of patients who stopped drinking and smoking, to evaluate their experience.

Anyhow, in my opinion, this experience is relevant and could serve as a starting point for further patient engagement experiences.

Response: Thank you for the comment. We agree that it would be great to have had a few more participants in the engagement event, and thus we mentioned it in our manuscript as a limitation (lines: 279-284). We also agree that having participants who had stopped drinking and smoking would have been beneficial; but believe that our broad definition of alcohol consumption allowed for some of these views to arise during the event.

This is a really interesting article which clearly describes the study. It sets out an innovative approach that makes the link between evidence based practise and approaches that are sensitive
to the community setting within which they are working. The article also clearly sets out the limitations of the study. The numbers involved are small and there may be some bias caused by the fact that a third of people invited to be involved did not attend the workshop that is at the heart of the study. This is an interesting piece of work which should be published.

Response: Thanks for your positive comments.

Reviewer: 3 (minor revisions)

Overall an interesting article and one that could provide some valuable insight in how to engage patients to jointly create resources to enable them to stop or reduce drinking. It is also possible to see that this could be used in other scenarios as patient participation is valuable.

Method - can a note be added that they participants are also trying to give up smoking and are currently taking part in the STOP programme.

Line 79 - should participant be singular or plural?

Lines 78-80 - can the text be made a clearer, it is a bit ambiguous as to who could be part of the programme

The rationale behind including those whose alcohol consumption was only one drink in the last year rather than so many units per week or month - can this be explained as quite a lot of people could be included who are not part of the actual target group i.e. those who drink at hazardous levels as defined by Audit-C or if this is not the target group can this be clarified in the text

The participants section (line 89) could include the actual numbers of the people in the event e.g. 79% (11 people) reported drinking alcohol. Could there also be an ethnic group breakdown included?

What is the Audit-C screening tool - could a very brief description be included here?

Procedure (line 97) should there be a brief description of the researchers' suitability for the workshop?

Results - were there any differences noted by participants for those from different life stages e.g. new parents or soon to be parents giving up smoking or those who have just retired. Also, were there any differences in how different ethnic groups would use the resource?

Was the final resource that is now being used with patients on the COMBAT programme piloted or tested with anyone that took part in the workshop?
Would it be possible to show some of the findings as a chart - for example the health information as a 'visually appealing graphic' (line 207).

It would also be good if the final resources was available to see with the article - even just a link to it - it is mentioned in the text that it is included (line 213) but it is not possible to see it as part of the review.

Thank you for your feedback. The following are our responses to your recommendations:

Reviewer 3: Method - can a note be added that they participants are also trying to give up smoking and are currently taking part in the STOP programme.

Response: Thank you for the suggestion. We have added detail that eligibility criteria stipulated that participants must be taking part in the STOP program and be a smoker trying to quit smoking (lines 79-83).

Line 79 - should participant be singular or plural?

Lines 78-80 - can the text be made a clearer, it is a bit ambiguous as to who could be part of the programme

Response: Thank you for the comment, we have changed the structure of the sentence to make the eligibility criteria more clear (see bullets, lines 79-83). The way the text is now structured, we believe the word “participant” (line 80) should remain as singular.

The rationale behind including those whose alcohol consumption was only one drink in the last year rather than so many units per week or month - can this be explained as quite a lot of people could be included who are not part of the actual target group i.e. those who drink at hazardous levels as defined by Audit-C or if this is not the target group can this be clarified in the text

Response: Thank you for the feedback, we have added the rationale behind including those whose alcohol consumption was only one drink in the last year, as opposed to those who drank at hazardous levels (lines 84-86). In short, we wanted to broaden the sample of participants amongst whom recruitment could take place.

The participants section (line 89) could include the actual numbers of the people in the event e.g. 79% (11 people) reported drinking alcohol. Could there also be an ethnic group breakdown included?

Response: Thank you for your suggestion; we have added the actual number of individuals in each category (Lines 98-100)Could there also be an ethnic group breakdown included?

Response: Unfortunately we did not collect data on participant’s ethnicity, so we are unable to provide it.

What is the Audit-C screening tool - could a very brief description be included here?
Response: Thanks for your suggestion to include a brief definition on the AUDIT-C. We have added this definition: “The AUDIT-C screening tool is an evidence-based, brief screen used to identify hazardous drinking, applying measures of quantity and frequency of alcohol consumption, as well as engagement in binge drinking.” (lines 101-103)

Procedure (line 97) should there be a brief description of the researchers' suitability for the workshop?

Response: We have added the following description to summarize the researchers' suitability for conducting the workshop: “One facilitator (NM) was trained by ICA Canada in Group Facilitation Methods, and has over seven years of experience supporting communities to reflect and develop their own appreciation of best practices, while at the same time being supported to share their knowledge of their health experiences and their local context. The other facilitator (AN) has specialized training in qualitative research focused on health behavior change and exploration.” (lines: 111-115)

Results - were there any differences noted by participants for those from different life stages e.g. new parents or soon to be parents giving up smoking or those who have just retired. Also, were there any differences in how different ethnic groups would use the resource?

Response: While it might have been interesting to examine differences between the different groups, the methodology we used was to encourage consensus among the group; for all group members develop, and agree to support a decision in the best interest of the whole; so that the workbook that was developed at the end would be acceptable and supported by all, even if not the "favorite" of each individual or group.

Was the final resource that is now being used with patients on the COMBAT programme piloted or tested with anyone that took part in the workshop?

Response: The final resource that is now being used with patients was not piloted or tested with workshop participants because the authors felt the resource accurately reflected client preferences/ideas from the engagement event, therefore further testing would not be necessary.

Would it be possible to show some of the findings as a chart - for example the health information as a 'visually appealing graphic' (line 207).

Response: Thanks for your suggestion; we have added a figure to show an example in the text (Figure 1: Educational workbook graphic example)

It would also be good if the final resources was available to see with the article - even just a link to it - it is mentioned in the text that it is included (line 213) but it is not possible to see it as part of the review.

Response: We apologize for the inconvenience. We were unaware reviewers would not have access to our supporting files. Please feel free to see the final resource by clicking this link