Reviewer's report

Title: ADAPTING THE JAMES LIND ALLIANCE PRIORITY SETTING PROCESS TO BETTER SUPPORT PATIENT PARTICIPATION: AN EXAMPLE FROM CYSTIC FIBROSIS

Version: 0 Date: 17 Apr 2019

Reviewer: Noel McCarthy

Reviewer's report:

The particular issue of infection risk for people with cystic fibrosis led to adaptations of the James Lind Alliance (JLA) standard approach, but as noted in the article the use of effects were to also support attendance of those unable to attend in person for other reasons, which may then be important for other conditions. I think that the discussion might consider this general point more fully, including whether standard methodology may exclude voices in the JLA process. Although the initial justification to vary the approach was very situation specific- it does read to me that once the question of "is this the best way" is raised it is difficult to put it back in the box and not look more broadly at the advantages and disadvantages of modified approaches both generally and for specific contexts.

The mixed video-conference / face to face meeting difference from standard JLA process are explicit but as non-expert in the JLA method I am not sure on the JLA standard process equivalent of he online surveys used to elicit and provide the initial prioritisation of questions. It would be useful to have a figure that is a flow chart of the standard JLA process and the process adopted to give an overview of the standard approach and the differences.

The use of a "room buddy" to represent those joining remotely sounds innovative, and highlights the difficulties in gaining full participation for both people on line and in a room for mixed video (tele) and in person meetings. The authors also report an online version of the physical sorting or priorities to facilitate full participation by those not in the room. This raises the question of whether a fully on-line facilitated discussion, supported by the right tools might be a generally applicable approach. If emphasising the general aspects of supporting people who are geographically remote, rail or otherwise unable to travel as well as those with an infection risk this fuller challenge to standard methodology is worth raising, including any defence of the current standard approaches.
Might there be an argument for an evaluation of a fully on-line vs standard process being applied to some areas to test the two?

As it is such a central driver of team considering alternative approaches it may be worth specifying that particular types of infection are problematic for patients with cystic fibrosis as the basis of advice to not mix socially. If it were any respiratory infection then the risk of picking infections up from people without cystic fibrosis would be more important with a different advice than the current advice targeting infections (substantially) restricted to people with cystic fibrosis.

There is no referenced discussion of others who have adapted teh JLA methodology. This should be included or explicitly identified as absent if this is the first report of a modification.

Although having read the paper the affection fo the "Question CF" wording echoing the hash tag and twitter names used it gives a confusing title in terms of this being the first thing that people see. I think that the title woudl lead to greater impact if wer more informative. e.g. Adapting the James Lind Alliance priority setting process to better support patient participation: an example from cystic fibrosis.

**Level of interest**
Please indicate how interesting you found the manuscript:

An article of importance in its field

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

Acceptable
Declaration of competing interests
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

2. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

3. Do you hold or are you currently applying for any patents relating to the content of the manuscript?

4. Have you received reimbursements, fees, funding, or salary from an organization that holds or has applied for patents relating to the content of the manuscript?

5. Do you have any other financial competing interests?

6. Do you have any non-financial competing interests in relation to this paper?

If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

None

I agree to the open peer review policy of the journal. I understand that my name will be included on my report to the authors and, if the manuscript is accepted for publication, my named report including any attachments I upload will be posted on the website along with the authors' responses. I agree for my report to be made available under an Open Access Creative Commons CC-BY license (http://creativecommons.org/licenses/by/4.0/). I understand that any comments which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

I agree to the open peer review policy of the journal