

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form ([see an example](#)) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below. Some articles will have been accepted based in part or entirely on reviews undertaken for other BMJ Group journals. These will be reproduced where possible.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Evidence base for an intervention to maximise uptake of glaucoma testing: A theory-based cross-sectional survey
AUTHORS	Maria Prior, Jennifer M Burr, Craig R Ramsay, David Jenkinson, Susan Campbell and Jillian J Francis

VERSION 1 - REVIEW

REVIEWER	Dr Judith Dyson Lecturer Mental Health University of Hull Room 206, Dearne Building Cottingham Road HULL HU6 7RX
REVIEW RETURNED	23/12/2011

GENERAL COMMENTS	This is a well written and interesting paper. This high quality research is a valuable contribution within the fields of public health and health psychology.
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REVIEWER	Dr Paul Leighton Research Fellow Division of Primary Care University of Nottingham The author declares no conflict of interest.
REVIEW RETURNED	05/01/2012

THE STUDY	<p>1) A little more information about the research sites would be useful. Specifically, the rationale for their selection might be explained and any population similarities/differences described between Lewisham/Southwark and Aberdeen [pg6 study design]. Pertinently, the results section [pg 9] reflects quite different outcomes for each site – better response rate in Aberdeen, relatively more deprived population in London. Do these two areas reflect a coherent population and/or a representative population with regard to the question being considered here? Some comment about these matters would be beneficial given the relevance ascribed to black ethnicity and lower socio-economic group described in the introduction [pg4].</p> <p>2) Whilst the study informs further research about glaucoma testing, this survey identifies predictors to attendance at a hypothetical eye test [not a test for glaucoma] this should be clear in the abstract</p>
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	<p>conclusion [pg 2 line13-14].</p> <p>3) The supporting materials raise no further issue, and there is no reason to include them in the text.</p>
RESULTS & CONCLUSIONS	<p>There is nothing fundamentally wrong with these sections, although at times I felt that the Discussion and Conclusion were a little jargon heavy in the consideration of the implications of this research. I wonder if sections [pg 12 line 30-53 & pg 13 line 50....] might offer some clearer indication of how this insight will be implemented, and what form any intervention might take [information leaflets, local radio advert, etc.].</p> <p>That said, I recognise that this is the function of your broader research programme and so will follow in future publications. however, i did think some trailer now about possible application might add to the readability of your findings.</p>

VERSION 1 – AUTHOR RESPONSE

Reviewer: Dr Judith Dyson

(C) This is a well written and interesting paper. This high quality research is a valuable contribution within the fields of public health and health psychology.

Response (C): We thank the reviewer for her positive comments about this paper.

Reviewer: Dr Paul Leighton

(D)

1) A little more information about the research sites would be useful. Specifically, the rationale for their selection might be explained and any population similarities/differences described between Lewisham/Southwark and Aberdeen [pg6 study design]. Pertinently, the results section [pg 9] reflects quite different outcomes for each site – better response rate in Aberdeen, relatively more deprived population in London. Do these two areas reflect a coherent population and/or a representative population with regard to the question being considered here? Some comment about these matters would be beneficial given the relevance ascribed to black ethnicity and lower socio-economic group described in the introduction [pg4].

Response (D): We agree that this is an important point. We have added to the manuscript to give a clearer rationale for the choice of location (p6). Aberdeenshire provided a mixture of urban and rural Scottish residents and the London Boroughs of Lewisham and Southwark contain the highest proportion of Black African or Caribbean residents in the UK. Within these areas we systematically biased our sample towards people over forty years of age, in lower socioeconomic groups and/or of African-Caribbean ethnicity. The two areas were chosen to provide geographic diversity, but they did not differ on the key variable we were attempting to predict. We ran an independent samples t-test and there were no significant differences in the key variable (intention) between the two locations ($p=0.084$), so we combined the two samples for the primary analysis. We have added text reporting this finding on page 9

(E)

2) Whilst the study informs further research about glaucoma testing, this survey identifies predictors to attendance at a hypothetical eye test [not a test for glaucoma] this should be clear in the abstract conclusion [pg 2 line13-14].

Response (E): We agree and have revised the abstract accordingly

(F)

3) The supporting materials raise no further issue, and there is no reason to include them in the text.

Response (F) We are not sure what the reviewer is recommending in this comment, but we are happy to revise further if needed.

(G) There is nothing fundamentally wrong with these sections, although at times I felt that the Discussion and Conclusion were a little jargon heavy in the consideration of the implications of this research. I wonder if sections [pg 12 line 30-53 & pg 13 line 50....] might offer some clearer indication of how this insight will be implemented, and what form any intervention might take [information leaflets, local radio advert, etc.].

That said, I recognise that this is the function of your broader research programme and so will follow in future publications. however, i did think some trailer now about possible application might add to the readability of your findings.

Response (F): We thank the reviewer for his insightful comments and for his acknowledgment that this paper reports one component of a larger study. We have undertaken revisions and rearranged sentences within the discussion section in order to communicate more clearly the implications of our findings to our target audience (p11-13).