

## 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

<b>TITLE (PROVISIONAL)</b>	Poor adherence of randomised trials in surgery to CONSORT guidelines for non-pharmacologic treatments (NPT): a cross-sectional study
<b>AUTHORS</b>	Nagendran, Myura; Harding, Daniel; Teo, Wendy; Camm, Christian; Maruthappu, Mahiben; McCulloch, Peter; Hopewell, Sally

### VERSION 1 - REVIEW

<b>REVIEWER</b>	Isabelle Boutron INSERM, Centre d'Epidémiologie clinique, Université Paris Descartes  I am working regularly with Sally Hopewell, author of this manuscript I lead the CONSORT NPT extension
<b>REVIEW RETURNED</b>	14-Oct-2013

<b>THE STUDY</b>	This is an interesting, well performed and well reported manuscript. I only have minor comments 1) table 1: please indicate what the ITA ITPR abbreviations mean. Further clarify that the second column related to "medical journals" and the last to "surgical journals" 2) table 2 is difficult to read for people who are not aware of the CONSORT NPT and CONSORT 2010 items. It would be much easier to report the content of each item. 3) Page 13/ the authors clearly indicate that they cannot make any statistical comparisons because of small number and immediately after they compare the results with no testing. This seems contradictory. 4) I think the authors should avoid making too many assumptions on the differences between medical and surgical journals as several confounding factors could explain the results
------------------	---

<b>REVIEWER</b>	Natalie Blencowe Centre for Surgical Research, School of Social and Community Medicine, University of Bristol, UK
<b>REVIEW RETURNED</b>	27-Oct-2013

<b>THE STUDY</b>	1. in the methods, the authors mention "inter-observer analysis was assessed by calculating the Cohen's kappa score" - I cannot find any information about this in the results section. 2. I am curious as to why the Linde score has been used to assess study quality, rather than the more recent and widely used Cochrane Risk of Bias tool. 3. The authors state that perhaps the problem of poor reporting might be linked to journal word counts. I assume they did not use
------------------	--

	included study protocols to assess the same reporting criteria - perhaps this should be mentioned as a limitation of the study 4. Abbreviations are used in Table 1 but these are not explained anywhere in the text or as a footnote (eg ITA, ITPR)
--	---

### VERSION 1 – AUTHOR RESPONSE

Reviewer Name Isabelle Boutron

This is an interesting, well performed and well reported manuscript.

I only have minor comments

1) table 1: please indicate what the ITA ITPR abbreviations mean. Further clarify that the second column related to "medical journals" and the last to "surgical journals"

RESPONSE: We have made the suggested change in the legend of table 1. We have also edited the columns as requested.

2) table 2 is difficult to read for people who are not aware of the CONSORT NPT and CONSORT 2010 items. It would be much easier to report the content of each item.

RESPONSE: We have edited the table so that items that appear in CONSORT 2010 but not in CONSORT NPT are no longer formatted in bold. We have also described this in the legend and provided a reference to the Appendix (S3) where the construction of the table is explained.

3) Page 13/ the authors clearly indicate that they cannot make any statistical comparisons because of small number and immediately after they compare the results with no testing. This seems contradictory.

RESPONSE: We have clarified to state that we are not making any formal statistical comparisons, only a descriptive statement. We have also removed the section relating to 10% superiority in adherence as this may be a chance finding given the lack of formal statistical testing.

4) I think the authors should avoid making too many assumptions on the differences between medical and surgical journals as several confounding factors could explain the results

RESPONSE: We have acknowledged this by adding an extra sentence on page 17.

Reviewer Name Natalie Blencowe

1. in the methods, the authors mention "inter-observer analysis was assessed by calculating the Cohen's kappa score" - I cannot find any information about this in the results section.

RESPONSE: We have added the Kappa score to the methods section on page 8.

2. I am curious as to why the Linde score has been used to assess study quality, rather than the more recent and widely used Cochrane Risk of Bias tool.

RESPONSE: There was no specific reason for using the Linde score over the Cochrane Risk of Bias tool. We were following suit from a previous review of CONSORT adherence in plastic surgery that had used the Linde scale to assess study quality. (Agha RA, Camm CF, Edison E, Orgill DP. The methodological quality of randomized controlled trials in plastic surgery needs improvement: a systematic review. *J Plast Reconstr Aesthet Surg.* 2013; 66(4): 447-52). Indeed, many of the domains are shared between the two scales and so any material difference in our assessment of study quality is very unlikely.

3. The authors state that perhaps the problem of poor reporting might be linked to journal word counts. I assume they did not use included study protocols to assess the same reporting criteria - perhaps this should be mentioned as a limitation of the study

RESPONSE: We have added this limitation (extra sentence on page 16).

4. Abbreviations are used in Table 1 but these are not explained anywhere in the text or as a footnote (eg ITA, ITPR)

RESPONSE: We have made the suggested change in the legend of table 1.