

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	To tweet or not to tweet about schizophrenia systematic reviews (TweetSz): study protocol for a randomised controlled trial
AUTHORS	Adams, Clive; Jayaram, Mahesh; Bodart, Angelique; Sampson, Stephanie; Zhao, Sai; Montgomery, Alan

VERSION 1 - REVIEW

REVIEWER	Prakash Hosalli Leeds and York Partnership NHS Foundation Trust, UK
REVIEW RETURNED	24-Mar-2015

GENERAL COMMENTS	<p>It appears as a clear and well conceived RCT on tweeting about systematic reviews on Schizophrenia.</p> <p>I would like to suggest few minor changes/clarifications.</p> <p>In the introduction the authors quote reference 9- to claim that considerable proportion of all twitter traffic is related to health matters. But the reference does not make such a claim- it says out of 2 billion public twitter messages, 1.5 millions were filtered as related to health matters and tries to identify public health trends. This reference does not link clearly with the earlier phrase about disseminating systematic reviews. The statement needs modifying or dropping of this reference.</p> <p>Methods and analysis: The authors state under Eligibility criteria Inclusion criteria Published full text CSzG reviews in the Cochrane Library and Plain Language. Summary (PLS) in summaries.cochrane.org (N= 170). Published protocol CSzG reviews that appear in The Cochrane Library. Any CSzG review not relevant to schizophrenia.</p> <p>But whether the last two- Published potocol CSzG reviews and any CSzG review not relevant to schizophrenia- are actually exclusion criteria? (As the study diagram also includes N=170 which are all published full text reviews, and the tweets are about systematic review on schizophrenia)</p> <p>Randomisation: was there any method or criteria in arriving at the cut off scores for definition of high, medium and low base line activity? It would be useful to know it.</p> <p>Data analysis: The authors rightly state that they anticipate that the intervention will be fully implemented and hence assume that there will be no</p>
-------------------------	---

	<p>missing primary outcome data and they say if either of the assumption is untrue they will do a sensitivity analysis. But it should not be needed. Unlike a drug trial where subjects might drop out or withdraw consent after randomisation, here the participants are systematic reviews rather than people hence missing data should not arise. But if for some reason the authors did not tweet about some reviews then reasons needs to be explained.</p> <p>Finally on the ISRCTN registry the overall trial status is recorded as completed (last edited 9/12/2013). It would be interesting to know the results and hopefully authors will be able to publish it soon.</p>
--	--

REVIEWER	Matthew DeCamp Johns Hopkins University USA
REVIEW RETURNED	01-Apr-2015

GENERAL COMMENTS	<p>This is a clearly written, straightforward, and important study that addresses an unanswered and important question. It takes advantage of an existing resources, the CSzG systematic reviews, investigating the whether Tweeting these reviews affects page views. The primary and secondary objectives are clear.</p> <p>A few points might improve the protocol:</p> <ol style="list-style-type: none"> 1. It was a little unclear how the baseline categories of activity were defined at ~ 4, 19 and >19. The could be further described. 2. Although the authors acknowledge that they are not testing different 'pithy' statements, I would be interested to know more about how those are created (e.g., whether by the same person, how reviewed and so on). On Twitter the content of these may very well affect their impact. 3. I might consider adding "Re-tweet number" as a secondary measure of impact. 4. The distinction between Weibo and Twitter may require clarification and even disaggregation in the analysis. To me it was unclear if those data will be aggregated. 5. Significant attention should be paid - and I think the authors plan to pay this attention - to whether the activity early in the study affects later study results. This is particularly important if baseline activity is based on 2014 data. 6. The authors might do well to comment as to whether ~3 page views per week is meaningful, and if so how, based upon the statistical calculations. <p>As a final minor comment, the title of the study suggests Tweeting about schizophrenia generally, rather than Tweeting systematic reviews. The title might be more specific.</p> <p>Nevertheless this remains an important and innovative protocol whose results I will very much anticipate.</p>
-------------------------	---

VERSION 1 – AUTHOR RESPONSE

Reviewer 1:

In the introduction the authors quote reference 9- to claim that considerable proportion of all twitter traffic is related to health matters. But the reference does not make such a claim- it says out of 2 billion public twitter messages, 1.5 millions were filtered as related to health matters and tries to identify public health trends. This reference does not link clearly with the earlier phrase about disseminating systematic reviews. The statement needs modifying or dropping of this reference.

Methods and analysis: The authors state under Eligibility criteria

Inclusion criteria

Published full text CSzG reviews in the Cochrane Library and Plain Language.

Summary (PLS) in summaries.cochrane.org (N= 170).

Published protocol CSzG reviews that appear in The Cochrane Library.

Any CSzG review not relevant to schizophrenia.

But whether the last two- Published potocol CSzG reviews and any CSzG review not relevant to schizophrenia- are actually exclusion criteria? (As the study diagram also includes N=170 which are all published full text reviews, and the tweets are about systematic review on schizophrenia)

Randomisation: was there any method or criteria in arriving at the cut off scores for definition of high, medium and low base line activity? It would be useful to know it.

Data analysis:

The authors rightly state that they anticipate that the intervention will be fully implemented and hence assume that there will be no missing primary outcome data and they say if either of the assumption is untrue they will do a sensitivity analysis. But it should not be needed. Unlike a drug trial where subjects might drop out or withdraw consent after randomisation, here the participants are systematic reviews rather than people hence missing data should not arise. But if for some reason the authors did not tweet about some reviews then reasons needs to be explained.

Finally on the ISRTCN registry the overall trial status is recorded as completed (last edited 9/12/2013). It would be interesting to know the results and hopefully authors will be able to publish it soon.

Reviewer 2:

A few points might improve the protocol:

1. It was a little unclear how the baseline categories of activity were defined at ~ 4, 19 and >19. The could be further described.

2. Although the authors acknowledge that they are not testing different 'pithy' statements, I would be interested to know more about how those are created (e.g., whether by the same person, how reviewed and so on). On Twitter the content of these may very well affect their impact.

3. I might consider adding "Re-tweet number" as a secondary measure of impact. _ we won't be able to add re-tweet number as that is not a parameter we can measure from google analytics. GA would not be able to track someone else's Twitter page or any twitter page as it does not provide data on dynamic pages and can only track static web pages.

4. The distinction between Weibo and Twitter may require clarification and even disaggregation in the analysis. To me it was unclear if those data will be aggregated. – The data will be aggregated as they are both similar platforms, except that Twitter is not available in China, however Google Analytics will track both platforms similarly.

5. Significant attention should be paid - and I think the authors plan to pay this attention - to whether the activity early in the study affects later study results. This is particularly important if baseline activity is based on 2014 data.

6. The authors might do well to comment as to whether ~3 page views per week is meaningful, and if so how, based upon the statistical calculations. – we will do the full statistical calculations once we have completed the trial and report it in the results paper. It is difficult for us to address this meaningfully before looking at the full results.

As a final minor comment, the title of the study suggests Tweeting about schizophrenia generally, rather than Tweeting systematic reviews. The title might be more specific. = amended

Nevertheless this remains an important and innovative protocol whose results I will very much anticipate.