

## **Reviewer's report**

**Title:** Factors Associated with Testicular Self-Examination among Unaffected Men from Multiple-Case Testicular Cancer Families

**Version:** 1 **Date:** 20 March 2009

**Reviewer:** Suzanne O'Neill

### **Reviewer's report:**

This is well-written, clearly presented report that applies the Health Belief Model to a study of testicular self-examination (TSE) in 99 unaffected men with a family history of testicular cancer. In addition to this family history, some men had other independent risk factors. Almost half of the sample reported regular TSE. Physician recommendation and higher cancer worry predicted greater likelihood of regular TSE. This is the first report of its kind. It adds to the literature by demonstrating that even in this higher risk sample, TSE likely does not correspond to ACS recommendations. The data provide a basis for future research and potential means of intervention to increase screening in this higher risk group of men.

### **Major Compulsory Revisions**

As the authors acknowledge, the definition of "regular TSE" is problematic and the authors' choice to use 6 months as the cutoff seems reasonable. However, would the results have been different if you had used a slightly different cutoff? Some comment on this, including examination of the data and reporting of these results, would be helpful to give credibility to the outcome.

The point that cancers found by TSE, rather than by symptoms, would be more amenable to treatment should be better substantiated. Using evidence from other cancers may be necessary. This would strengthen the argument for looking at this outcome, given there are no strong recommendations for TSE or defined screening interval.

What are the implications of the fact that HBM variables (other than physician recommendation) were not predictors in the multivariate model? Should other approaches be considered? Might knowledge, benefits and barriers be related to having received a physician recommendation?

### **Minor Compulsory Revisions**

Missing from Cancer Worry in Table 3.

Ensure formatting is consistent throughout.

P. 8: The MHLC as used consists of 3 scales, not scale items.

**Level of interest:** An article whose findings are important to those with closely

related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests.