June 16, 2021

Dear Editor, Dear Reviewer,

Thank you for giving us the opportunity to submit a revised version of the manuscript. We appreciate your comments, concerns and suggestions. We have incorporated changes within this version of the manuscript. The title of the manuscript is changed according to the suggestion of reviewer 1:

"The importance of communication in medical practice and medical education – an emphasis on empathy and attitudes and their possible influences"

A point-by-point response to the reviewer's comments is given in this file and we try to address the issues raised by the reviewer as best as possible. We also attached one version with tracked changes. In this version, adaptations made in response to reviewer 1 are highlighted with yellow and adaptations made in response to reviewer 2 are highlighted in green.

Should you have additional comments and further questions please don't hesitate to contacting us. We look forward to hearing from you regarding our submission and once again, we thank you for the time and effort you put in reviewing our paper.

Sincerely,

Dagmar Steinmair Guoruey Wong Katharina Zervos and Henriette Löffler-Stastka

Comments from Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific comments to Authors: This study emphasizes the importance of empathy and communication in medical practice and medical education from the perspective of doctors.

Although the point of view is novel and the discussion is also complete, the study has some weaknesses with I suggest be addressed before publication:

Comment 1:

The doctor's answer may be subjective due to the combination of his own experience.

Whether this sample size can rule out the prejudice caused by such clinical departmental differences.

Response 1: Thank you for pointing this out. The reviewer is correct. We agree that this is a potential limitation of the study. We have added this as a limitation. However, the design was an exploratory, hypothesis generating design right from the conception

Comment 2:

The exclusion criteria seem to be unclear.

Response 2: Concerning the exclusion criteria of the supervising physicians: The aim of the study was to obtain a broad reflection of the teaching physician's ideas about patient-history-taking. We aimed to emphasize especially on a possible effect of gender and specialty. We adapted this paragraph and trust that it now is explained in more detail.

Comment 3:

Questions in the interview are based on medical students' own experience.

Response 3: The questionnaire was developed by an interdisciplinary team of physicians and psychologists aiming to understand and record the existing theory behind the practical teaching of patient history taking in practicing physicians, who carry out a educational mission.

Whether to refer to the perspective of the patients or the instructors to minimize personal bias.

This point needs to be supplemented.

⇒ The personal bias on the field of patient history taking is always present, as a relationship between physician and patient needs to develop. But to include the patient's feelings and reflections might be helpful to develop further educational programs.

Comment 4:

The article does not explain the tables and charts well. For example, see p.8, lines 49-53: "In Figure 1 we present the distribution of questioned attending physicians regarding their specialities and gender." Table 1 shows the specialization and gender.

Response 4: Thank you for your comment on tables and charts, we now provided explanations that are more detailed. We deleted Figure 1.

Comment 5:

There are many errors of expression and poor grammar. For example, see p.13, lines 2-3: "Observation and imitation lead to acquirement of embodied skills; this develops in empathic social relationships."

⇒ **Response 5**: Thank you for your comment on English grammar and expressions. We proofread the manuscript. Guoruey Wong is a native English speaker and revised this work prior to submission.

Comment 6:

In addition, the title should be "The importance of communication in medical practice and medical education – an emphasis on empathy and attitudes and their possible influences".

Response 6: We think that your suggestion for a new Title fits the study very well. Thus, we followed your suggestion in adapting the title accordingly.

Comment 7:

The article explains the gender effect of empathy based on the characteristics of the interviewees.

The influence of the difference between clinical departments on empathy and how to deal with it should also be elaborated in detail.

Response 7: Thank you for pointing this out. The study design allows for a qualitative analysis of the data only, according to the exploratory design. Interpretations of differences between clinical departments have to be carried out with caution. We addressed your comment on this issue in the discussion section. However, it would be interesting to explore this aspect in further research.

Comments from Reviewer #2:

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade C (A great deal of language polishing)

Conclusion: Minor revision

Specific Comments to Authors: I have read the article titled "The importance of communication in medical practice, and in medical education – an emphasis on empathy and attitudes and their possible influences" with interest. The authors have studied a unique topic. They have covered the literature comprehensively with a clear description of the results. References were appropriately cited as well. In conclusion, I would thank the authors for their contribution.

I have several points to address from a reader perspective with research and psychiatry background regarding this topic"

Comment 1:

- Need to correct the title
- Response 1: We have changed the title and trust that it now suits the paper and topic better.

Comment 2:

- Need to add clear objectives as an aim in your abstract and introduction
- Response 2: Thank you for your suggestion, we adapted the abstract and the introduction accordingly.

Comment 3:

- Remove the headings from your introduction
- ⇒ **Response 3**: The introduction has been updated, including removal of the headings.

Comment 4:

- Need to shorten the introduction only to 3-4 paragraphs
- ⇒ **Response 4:** The introduction has been updated, including removal of the headings.

Comment 5:

- Add the significance and impotent of your study at the end of your introduction
- ⇒ **Response 5**: The introduction has been updated, including a statement about significance and importance of the study.

Comment 6:

- Add subheadings to your methods, e.g., study design, setting, population, sample size and sampling methods, inclusion and exclusion criteria, instruments, ethical issues, and statistical analysis.
- ⇒ **Response 6**: Thank you for pointing this out. We added subheading to our methods sections and agree that the more structured presentation of this section fits better.

Comment 7:

- Conclusions which usually serve two functions. The first is to summarise and bring together the main areas covered in the writing, which might be called 'looking back' and should be related to your findings; and the second is to give a final comment or judgement on this as a recommendation. The final comment may also include making suggestions for improvements and speculating on future directions.
- Response 7: We now provided an adapted conclusion section based on your suggestions.

Comment 8:

- The manuscript needs a language check
- ⇒ **Response 8:** Thank you for your comment on the language check. We proofread the manuscript. Guoruey Wong is a native English speaker and revised this work prior to submission.