Reviewer's report

Title: Criminally violent victimisation in schizophrenia spectrum disorders: the relationship to symptoms and substance abuse.

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Reviewer: Tomas Moberg

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I have been in contact with patients with schizophrenia / schizoaffective disorder as a psychiatrist / forensic psychiatrist in the past 15 years. The reviewed cohort study investigates the victimization in this population. Based on my clinical experience, I think the authors have focused on an important field in psychiatry / forensic psychiatry with great clinical relevance. The researchers' main conclusion is that substance abuse (particularly drug abuse) is a key predictor of violent victimization for patients with schizophrenia / schizoaffective disorder, whereas harmful alcohol use, demographic factors and symptoms of disease are not associated with victimization.

The authors' main conclusion is reasonable and is important, not only for clinicians who treat this population, but also as for researchers in the field. The question is whether victimization is caused by a confusion of effects, i.e. that there are underlying antisocial personality traits with impulsive and uninhibited lifestyle and not the drug itself that explains the victimization? The authors have commented on this and appear to be well acquainted with their subject area. This should be investigated further in later studies. The research team has made an effort to investigate how alcohol has an impact on victimization and have not found such link. This finding is interesting. As a forensic psychiatrist, investigating criminal cases on behalf of the court, it is my experience that the majority of the victims in similar populations have been drunk. In the investigated population the overwhelming majority of patients had a lifetime history of harmful alcohol use pattern, which might explain that there is no significant difference between the victimized and non-victimized groups. If the authors agree, they should develop the argument a little further.

The authors must explain how the patients were diagnosed and how they were recruited. Have they used any kind of structured approach, more than clinically verifying that the criteria’s for the diagnoses are fulfilled in DSM-IV-TR ? Are the diagnoses valid when such a high percentage of the patients have used substances that might induce psychosis? Regarding the other measures, are they all derived from self-reporting questionnaires?

The authors also wanted to investigate whether the symptoms of mental illness are crucial for victimization. The hypothesis has been that a high degree of symptoms has led to victimization. However, in his study only clinical stable patients were selected, whereas clinically unstable patients were excluded.
According to my opinion this means that the researchers have been unable to consider the hypothesis thoroughly. The approach is understandable for a high internal validity, but if the authors had chosen a more heterogeneous group of patients it is possible the result might have been quite different. The external validity is low and it’s therefore not possible to generalize the results. The authors have mentioned this, but could develop it a little bit further. How big is the source population, and how do they chose the study population? The authors should more clearly emphasize the weaknesses of their study.

As a non-Australian, I would like to have it clarified that the police authority doesn’t erase information about a person from its records when the perpetrator or victim have not been involved with the police for 10 years. Some European police authorities apply this principle with less serious crimes.

Regarding the statistical methodology, I would like to have the tests of parametric and non-parametric tests specified more clearly.

**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.