Reviewer's report

Title: Follow-up study on health care use of patients with somatoform, anxiety and depressive disorders in primary care.

Version: 1 Date: 31 August 2007

Reviewer: Barbara Tomenson

Reviewer's report:

General

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1. The correct terminology for the study design is ‘two-phase’, not ‘two-stage’.

2. page 4, lines 10-11. How many subjects were excluded? Were these included in the original sample of 1778 patients? If so, then the participation rate is slightly more than 59% because the denominator should be less than 1778.

3. A reference is needed for the decision to classify subjects as high risk if they scored 15 or more on the HADS and/or 5 or more on the PSC.

4. Page 7, lines 11 and 13. I cannot see how response rates can be approximately 60% for subgroups, when the overall response rate seems to me to be 400 out of 589, which is 68%.


6. Page 8 para 1, page 9 line 5 and table 3. The analyses section states that only model 2 was adjusted for age, gender, somatic morbidity, whereas the results section and table 4 state that all (presumably meaning both) models were. The correct terminology is adjusted, rather than corrected (footnote table 4). There is also an inconsistency as to whether both the CIRS somatic score and the number of unique somatic prescriptions were used, or just one of these. In view of the fact that they are likely to be very highly correlated, I would suggest that just one should be used.

7. Results, paras 1 and 2 and table 2. Results of significance tests comparing the group with and without psychiatric disorders should be presented, rather than a fairly arbitrary description of which variables show differences. Page 8, last line. It is only the groups with somatisation disorders which have more somatic related prescriptions than the group with no psychiatric disorders.
Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

1. The paper needs to be consistent in the use of terminology eg mental disorders in tables and psychiatric disorders in the text.

2. When percentages of subjects within the group with psychiatric disorder are quoted, it should be calculated for this group as a whole, rather than quoting the lower and upper of the 3 individual percentages from tables 2 and 3.

Discretionary Revisions (which the author can choose to ignore)

1. It would be helpful to see the actual number of patients who suffered from each of the three types of psychiatric disorder, and the number with both depressive and somatoform disorder.

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests.