Reviewer’s report

Title: The Effect of Socio-demographics, Depression Symptoms and Social Support on Black-White Differences in Health-Related Quality of Life in Early Pregnancy: The Health Status in Pregnancy (HIP) Study

Version: 2 Date: 7 January 2013

Reviewer: Julie Jomeen

Reviewer’s report:

Many thanks for the opportunity to review this paper. This remains a relatively under-researched area in childbearing women and this generally well written paper undoubtedly will add to the body of knowledge in this field.

Minor essential revisions

1. The question posed is well defined, however the background literature cited seems somewhat scant. Whilst I realise there is not a plethora of literature in this area, there does seem to be some studies which should have been included e.g. McKee et al 2001 – a paper which considered depressive symptomology and quality of life in Black and Hispanic women. The focus of the literature also appears to be somewhat US centric with little acknowledgement of the studies and literature on QoL outside the US. Some interesting and relevant work has also been undertaken in the UK and Europe, which would internationalise the introduction.

2. The methods are well described and appropriate to the study and questions posed. The claim however that the SF36 has not been validated in pregnant women is not accurate, please see a UK paper, which demonstrated it to be a feasible and reliable tool, performing well in psychometric terms in pregnant women as an eight sub-scale instrument; Jomeen J and Martin CR (2005). ‘The factor structure of the SF-36 in early pregnancy’. Journal of Psychosomatic Research, 59: 131-138.

3. I also wonder about the validation of the CES-D in antenatal women and why this scale was chosen when other scales have been validated to screen for/predict risk of depression in pregnant populations. Some further, if brief discussion, of this appears warranted

4. Discussion – paragraph 4: The authors suggest peer support groups as potentially useful, there is also some international literature on this topic which would be useful to refer to here and might help to give the discussion and the paper overall a more international context and relevance. I think that an approach throughout the paper which attempts to acknowledge the wider relevant international literature would add to this papers utility.

5. A reference is required to support the claim that a difference of 6 or more points is considered to be an important clinical difference in functioning.
6. Discussion – paragraph 3: The authors state that their findings are in contrast to other studies in relation to the presence of medical condition/s and their impact on HRQoL – whilst this is true there are no references to support this claim

Discretionary revisions

7. It is interesting that whilst black women score higher on the CES-D, a statistically different finding (unadjusted, despite differences in scores this was not a statistically different finding in relation to racial differences in scores for mental health on the SF-36? Do the authors have any views on this?

General comments

The title and abstract accurately convey the content of the article

The authors acknowledge the limitations of the study and the context of this work in relation to a broader study.

The conclusions drawn from the data appear sound and report some interesting findings. Seemingly and importantly adding further understanding to the nature of the relationship between depressive symptoms and QoL in particular potentially supporting the direction of causality.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

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