Reviewer’s report

Title: Barriers in recognising, diagnosing and managing depressive and anxiety disorders as experienced by Family Physicians; a focus group study.

Version: 1 Date: 20 July 2007

Reviewer: Peter Bower

Reviewer’s report:

General

-------------------------------------------------------------------------------

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

The use of qualitative studies to examine barriers is generally done to help develop new methods and interventions that are more closely aligned with the views of clinicians. The main limitation of the paper is that the implications of the study are not really drawn out. Although page 14 summarises the main findings, the authors have not really presented specific ideas as to how these issues can be ‘taken into account’. I would have expected to see a much more detailed discussion of how the findings can be used, discussing current quality improvement methods in mental health in primary care and stating how they could be modified to make them more closely aligned to the views of practitioners. A more detailed discussion of how the results can be used to design the next generation of mental health interventions would significantly increase the impact of the study for the Journal readers.

For example, what is meant by the statement that ‘patient education should be strengthened’. What is the evidence that this is effective? How should it be delivered? Is this something that the FPs should be doing, or do they see this role being delegated to someone else?

Similarly, the statement that ‘FP -friendly psychometric tools for diagnosis and mental burden are welcomed’ seems to ignore the work that has been done in this area (e.g. PHQ-9 and other brief primary care scales), although it is possible that they have not been translated or introduced locally.

-------------------------------------------------------------------------------

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

The authors use three quite different groups to make up the focus groups, but they present no data on differences in content of the themes between the groups. This may benefit from a brief mention. For example, what characteristics (if any) distinguished those who doubted whether management should be a core job of
I was not sure of the meaning of the ‘phrase ‘The assessment of the patients’ psychological burden was perceived as crucial and a key variable to decide on a diagnostic label.’ What exactly was meant here? Are they arguing for diagnosis here, or a simpler assessment of total burden? Similarly, the meaning of ‘non structural cooperation between family practice, primary care psychologists and specialised mental health care’ was not immediately obvious and might be clarified.

Discretionary Revisions (which the author can choose to ignore)

The paper summarises previous qualitative studies of this issue in the discussion, and I felt that a summary in the introduction might be preferable, to place the findings more clearly in the context of the available literature and more clearly indicate the findings that are replications and those that are new. Presenting a summary of the main themes from previous studies in a table might make this comparison easier.

It is not clear to me exactly how the DAQ scores and the qualitative data have been ‘triangulated’. This might benefit from further discussion. Surely the DAQ and the focus groups have different aims? I thought the DAQ results were really to assess the degree to which the attitudes of the GPs in the groups were broadly representative of GPs generally.

What next?: Accept after minor essential revisions

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

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'