Reviewer's report

Title: Antidepressant treatment and cultural differences - a survey of the attitudes of physicians and patients in Sweden and Turkey

Version: 1 Date: 27 February 2010

Reviewer: Scott Patten

Reviewer's report:

This is a very interesting paper. It is also very topical because it emphasizes the reality of heterogeneity in the manifestations of depression - a reality that often seems under emphasized in the Psychiatric literature.

The paper is economically and clearly written. I have some suggestions. These all fall under the category of discretionary revisions.

Major Compulsory Revisions: None
Minor Essential Revisions: None
Discretionary Revisions: see below

Abstract:

It should be clarified, I think, that the prominent symptom scale was an ad-hoc (not validated beyond face validity).

The reference to the number of symptoms in the results section of the abstract refers to a very small number of symptoms and will be difficult for readers of the abstract to know how depressed patients can have a mean of only one or two symptoms - I suspect that the reference is to prominent symptoms.

Also in the results section, the reporting of "response" should be clarified: this is a mean change in the depression rating. In the depression literature "response" usually refers to a categorical outcome.

Results:

There is a possibility of confounding due to the younger age (of the greater improvement in Turkey) in Turkey - older age may be associated with depressive episodes of longer duration. This was apparently dealt with by linear regression, but the reader is left to struggle with the regression results in the extremely complex Figures presented. This detracts from the paper's impact.

I feel that some of the comments about under diagnosis of anxiety are overstated since anxiety symptoms can legitimately be subsumed under a diagnosis of depression - and although this will change in DSM-V, anxiety-depression together are not yet a formal diagnosis.
The Sheehan scale results should be more prominent in the text in my view. These results are not described much, but are important.

It is not clear to me exactly how compliance was assessed.

An interpretive point is that recent studies have indicated that antidepressants are relatively ineffective in mild depression - could this explain part of the apparent difference in outcome? Also, the much larger proportion reporting minimal improvement is Sweden is striking and perhaps deserves greater emphasis.

Scott Patten

**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.

**Declaration of competing interests:**

I declare that I have no competing interests