Reviewer's report

**Title:** Talking about depression: a qualitative study of barriers and facilitators to managing depression in people with long term conditions in primary care.

**Version:** 1  **Date:** 25 November 2010

**Reviewer:** Gail Gilchrist

**Reviewer's report:**

Talking about depression: a qualitative study of barriers and facilitators to managing depression in people with long term conditions in primary care

This qualitative study in primary care is of great interest and clinical relevance. Furthermore, few studies have been conducted in this area. The paper addresses the education of health professionals about fetal alcohol syndrome. It is my opinion that it requires minor revision to bring it to the standard of publication for this journal.

**Title**

Facilitators arising from the qualitative study need to be stressed. The focus of the paper is on barriers.

**Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)**

The paper doesn’t address the title

**Background**

First sentence – definition of LTC required

Limited patient and focus group data presented.

**Results**

Second paragraph is a summary of the key themes before they have been presented. I think this would read better at the end of this section.

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

Consistency of terminology – long term conditions vs. chronic conditions vs. chronic disease – in title, abstract and main body of text

**Abstract**

Methods. As is currently written it is not possible to determine 1) how many participants there were in total and 2) whether 1 or 2 focus groups were undertaken

Results. As the conclusions feature the abbreviation QOF these should be shown the first time Quality and Outcomes Framework. (Note the QOF should be
explained for readers outwith the UK who will not be familiar with it). Only barriers are presented despite the title of the manuscript stating barriers and facilitators

Conclusions. Focus on primary care only when others are interviewed. Conclusions are currently repetitive of results. Perhaps the conclusions relating to BME should be discussed in addition.

Background
There has also been considerable research conducted on reasons why GPs “struggle to recognise, diagnose and then manage depression” in people without LCT and highlighting this would add to the discussion and conclusions.

First sentence – definition of LTC required

Typo – the NICE have….

The statement that accompanies reference [7] is referring to people with LTC or in general – requires clarification

Methods
Again, the authors state that the wanted to “elicit views …barriers to the management of depression”. Facilitators are not discussed.

Data analysis should include focus groups and the analysis of both data sets as discussed in the abstract – “inspected for commonalities using a constant comparative method”. The triangulation of results is not discussed. Whereas in the methods section the FG are presented as validation - perhaps a reordering of the methods and enhancing the analysis section will make this clearer.

The sentence on ethics committee should have a title as it is not part of the previous section.

Results
Page 8 typo – patients’ minds – the apostrophe is missing

Pg 12 when referring to PHQ should be PHQ-12?

Negotiating the label
Are these findings corroborated with patient interviews? Would be useful to compare with patients’ report.

There are no quotes from carers and limited quotes from focus groups.

Think it would be useful to split results into BARRIERS and FACILITATORS to managing depression

The results section is very long.

Conclusions
Again facilitators are not mentioned.
Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

Discussion

The conclusions would benefit from an enhanced discussion on the implications of the results; for diagnosis, BME groups and depression as this is currently limited. Some suggested reading includes


**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