Reviewer's report

Title: Child mental health care in Dutch general practice: Time trend analyses

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Reviewer: Kapil Sayal

Reviewer's report:

This is a clear and well-written manuscript which reports on changes in the identification, interventions and referrals for child and adolescent mental health problems in General Practice in the Netherlands. I have suggestions for a number of minor essential revisions.

Title & Abstract

Both the title and manuscript focus on the term ‘child’ mental health. However, the sample reflects those up to the age of 18. I would recommend that the title and text throughout the manuscript is amended to reflect “child and adolescent” mental health problems.

Since many readers only look at Abstracts it would be helpful to have an additional line on the service context in the Netherlands. I would suggest that this could be put in the 2nd sentence of the Background section of the Abstract e.g. “measures to strengthen primary mental health care services have led to an increase in provision of primary care psychologists and social workers and may have affected GP’s roles in child and adolescent mental health care.” This would aid with the interpretation of the Results in the Abstract.

Background –

1) this section provides a very clear description of the service and policy context in the Netherlands and changes in primary mental health care provision. It would benefit from a slight expansion to reflect the broader international context, especially the United States e.g. incorporating reviews of the wider international literature - Zwaanswijk et al (2003) European Child and Adolescent Psychiatry, Sayal (2006) Journal of Child Psychology and Psychiatry.

2) it would be also worth including the recent systematic review of identification of developmental and behavioural problems in primary care (Sheldrick et al; Pediatrics 2011).

3) When describing the principle of stepped care - this should also include that a criteria for referral is that the level of severity of problems means that initial secondary care input is more appropriate.

Methods – please explain what ambulatory mental health care organisations are

Results –

1) When describing the prevalence of mental health problems it is more accurate
to say the prevalence of 'diagnosed' mental health problems.

2) Table 2 was hard to interpret initially. It would be better to present the prevalence figures as per 100 persons aged 0-18 years. Furthermore, the 0-18 age group is broad. As different child and adolescent mental health disorders present at different ages, is it possible to present the various diagnostic categories in table 2 by age categories i.e. 0-5, 6-12, 13-18 years? This would be more meaningful clinically.

3) Prescriptions of psychotropic medication – I was not clear whether GP’s or secondary care specialists initiated these prescriptions. It might be that the initial diagnosis and treatment was commenced in secondary care with primary care physicians then taking on longer-term prescribing.

4) Children with over-activity – it should be made clear in the Results (pg 8 2nd paragraph) that this is referring to children with a primary care diagnosis of overactivity. In the Netherlands are children with overactivity also referred to paediatricians or only to secondary mental health care?

Discussion:

1) Findings from the study should be related to recent time trend studies from other countries in Europe e.g. Sourander et al (2004), Sayal et al (2010).

2) end of paragraph 3 – recent qualitative work in the UK has also highlighted that the limited length of consultations may act as a barrier to parental expression of concerns.

3) 1st sentence of the 5th paragraph – as above, should clarify that the paper is referring to the prevalence of diagnosed mental health problems rather than the actual prevalence of problems.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests