Reviewer's report

Title: Managing depression in primary care: A meta-synthesis of qualitative and quantitative research to identify barriers and facilitators.

Version: 1 Date: 18 February 2011

Reviewer: Theo Lorenc

Reviewer's report:

Overall, this paper is very good: the synthesis of evidence is concise and informative, and the methods appear largely sound. My comments include only one substantial reservation, and some minor points.

Major compulsory revisions

1. I have some concerns about the comprehensiveness of the review. It seems that there are studies meeting the inclusion criteria that were not included. For example, could the authors clarify whether the following references were considered for inclusion:


Gask L et al. (2005) Qualitative study of an educational intervention for GPs in the assessment and management of depression. Br J Gen Pract 55(520): 854-9 (This may have been excluded on the 'no intervention studies of education' criterion, although if so, it is hard to see the rationale for that criterion - excluding outcome evaluations is obviously reasonable, but qualitative process evaluations such as this seem relevant.)


If, as appears to be the case, the searches were not comprehensive, this may be due to the the search strategy, which is heavily reliant on a narrow set of MeSH terms and does not use a sufficient range of synonyms to ensure sensitivity.

This lack of comprehensiveness is not necessarily a fatal flaw in the paper, but should be addressed more explicitly in the discussion section. Under 'strengths and limitations', 1st para, the authors appear to argue that systematic reviews of evidence on attitudes need not attempt to locate all relevant data; this is controversial, to say the least. Consideration should be given to whether the review findings may have been biased by not including relevant studies, and to the lack of sensitivity of the search strategy as a potential limitation.
Discretionary revisions

2. Methods, 2nd para: It would be more transparent if the exclusion criteria were set out in the form of a checklist, rather than a description of desired characteristics - i.e. Was the study conducted in the UK? Were data presented from GPs/PNs? etc.

3. Given the lack of data on co-morbid conditions, the contextual information about the UPBEAT study in the Introduction and Discussion is of limited relevance. I would be inclined to reduce this to a brief acknowledgement, and present the review as a stand-alone synthesis of evidence on the management of depression.

Minor issues not for publication

4. Remove ‘note to self’ (Introduction, heading)

5. In Appendix 1, the search strategy should have numbered lines so the syntax is comprehensible.

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

**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.