Reviewer’s report

Title: The relationship of health care use with the persistence of insomnia: a prospective cohort study

Version: 2 Date: 12 October 2010

Reviewer: Sachiko Ohde

Reviewer’s report:

Major Compulsory Revisions
1. The title of this article is “The relationship of health care use with persistence of insomnia: a prospective cohort study.” The authors defined “Health care use” as medical consultations and hospital admissions, and also as encompassing more accidents at work and greater use of medication (compared to those without insomnia). However, the authors addressed only medication use and mood consultation and not hospital admission or accident rate in this study. The authors should reconsider the definition of “health care use”.

2. The authors report that prescription of hypnotics appeared most “strongly associated” with persistence of insomnia at follow-up (OR 3.18; 95%CI 0.93-10.92). This wording is misleading and not acceptable, given that association with use of hypnotics did not, ultimately, achieve statistical significance. The authors may be able to say “Hypnotic use tended to be associated with persistence of insomnia symptoms at 12 month”. P-value should also be reported to further strengthen this assertion.

3. The authors assessed anxiety and depression using the Hospital Anxiety and Depression Scale (HADS), however, did not provide these results. As mentioned in the manuscript, insomnia is closely linked to anxiety and depression and it apparently has a stronger association with persistence of insomnia than prescribed medication use. In this manuscript, the objective is to determine the association of persistence and remission of insomnia using a longitudinal study. If so, these results should be provided.

4. There are various factors which cause insomnia symptoms including anxiety, medication, alcohol, tobacco, and obesity (including its relationship to sleep apnea). The authors should provide more detailed information about patient characteristics related to these related insomnia factors.

5. The authors should include a section on limitations of this study.

Discretionary Revisions
6. Did author address the question of patient self-treatment? Many people turn to OTC drugs such as melatonin or valerian for insomnia symptoms, foregoing prescribed medicine. When the authors analyze the association of persistence and remission of insomnia, information about self-treatment may be important and should be included.
Minor Essential Revisions
7. The footnote in Table 2 should read “baseline” not “baselin.”
8. Please provide page numbers.

**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.