Reviewer's report

Title: Antidepressant use during pregnancy and potential neonatal adverse effects: Impact of a public health advisory and subsequent reports in the news media.

Version: 1 Date: 30 March 2005

Reviewer: Andrew Herxheimer

Reviewer's report:

General
**denotes major compulsory revisions; * minor essential revisions; others are discretionary

1. This small study addresses an interesting and important issue.
2. The methods are appropriate, but the telephone interviews could have been used to ask a few follow-up questions.
3. I think the data are sound as far as they go.
**4. The discussion and conclusions do not seem sufficiently supported by the data and references, but I have not had access to some important references, esp ref 6.
5. The title and abstract are satisfactory.
**6. The writing is inelegant and needs improvement.

7. Background:
*a. An explicit web link to the HC Advisory should be included.
*b. 'FDA' needs explaining for readers outside N America
*c. the word 'provide'/ 'provider' is tediously overused - about 6 times on p 3/4. It is not mentioned in the advisory, though that's implied. Best avoid it altogether.
d. Table 1 would be much more use if it listed the headlines from all the newspapers, magazines and broadcasts that reported the advisory - and perhaps also named important papers etc that did not.

8. Results:
a. line 1 Simplify to '… 43 (88%) completed the survey.'
*b. l.3 '2 had incorrect phone numbers' - no, the authors had wrong numbers!
*c. l. 8 underscore

9. Discussion
*a. the writing has various little errors
*b. para 1 last sentence needs rewriting
**c. para 2 1st sentence: does ref 6 really show this? I suspect that the evidence is much less robust than is implied here.
**d. p 9 l. 3-6: 'occurs in a minority of cases'. This seems to assume that it has been adequately looked for, which I think is doubtful.
**e. The following sentence is confusing: "Motherisk has previously shown that studies that reported negative results, were underreported as compared to studies that reported positive results - for example, the use of cocaine in pregnancy."10 Does positive and negative refer to benefit and harm, or proven and not proven?

**10. table 2. Point 5 in the information given seems too blandly and falsely reassuring. Most
physicians were not very knowledgeable on this, and the counsellor could have had no idea what had or had not been considered and discussed. This point need to be addresses in the Discussion

*11. a. Did the interviewer ask what happened when the 5 women discontinued the drug, or what the drug was? Or did any of the women talk about that?
*b. Of the MDs who recommended stopping the drug - why did they do so? Did any of the 5 women describe that consultation?
*c. Don't give percentages - and to two decimal places! It gives epidemiology a bad name.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

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

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Discretionary Revisions (which the author can choose to ignore)

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**What next?**: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

**Level of interest**: An article of importance in its field

**Quality of written English**: Needs some language corrections before being published

**Statistical review**: No

**Declaration of competing interests**: I declare that I have no competing interests