Author's response to reviews

Title: The prevalence of anxiety and depression in patients with age-related macular degeneration: A systematic review of observational study data

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Author's response to reviews: see over
Dear Dr Rovner,

Thank you for your helpful comments on our manuscript. We have explained below how these have each been addressed. All changes have also been highlighted in the revised manuscript.

1. Please describe in greater detail the most commonly used depression and anxiety scales, at least those that were used in the highest quality studies. This will give readers a better sense of what is being measured.

   Pages 8-9 of the revised manuscript now contain a section describing the instruments used in each study. We focus on the HADS and CES-D as these tools were used more widely than others. We think it is now clear whether clinical or non-clinical anxiety and/or depression are being measured and how this was done.

2. Please cite prevalence rates of depression and anxiety in the general population. Although there is some mention of this in the Discussion, it will be useful to have this made more explicit earlier. Some of the references for this are dated; more current epidemiological studies are available.

   Page 4 (Introduction) now contains statistics on the prevalence of anxiety and depression in the general and primary care UK populations. This contains more current references than those given in the Discussion which tend to relate to specific studies included in the review.

3. Please mention that prevalence rates of psychiatric symptoms are likely to be different in community compared to clinical settings.

   This is now mentioned on page 4.

4. In the comparison of prevalence rates of depression in persons with AMD and non-AMD sufferers, it is not clear if the comparison group is comprised of persons with other vision disorders or community samples. This refers to when the authors write, “Prevalence of depressive symptoms in adults with AMD was higher than those without”. It would be helpful to know who comprised the control group (page 10).

   Each of the studies used different comparison groups, with some using case-matched controls and others comparing prevalence rates with previous study findings or not indicating a comparison group. This problem is mentioned in the Discussion. Two sections have now been added to the Results (page 10) to summarise which studies used a comparison group and what this group was.
5. Although the cited studies found a relationship between severity of vision loss and depression, other studies, not cited here because a different methodology was used, have not found that relationship. Please consider citing Zhang, Xinzi et al JAMA Ophthalmology 131: 573-581, 2013.

Thank you for highlighting this publication which we have cited (page 14).

6. Please spell out CBT.

This has now been spelled out (page 15).

We hope these changes are acceptable.

Yours sincerely,

Gemma Mansell

On behalf of Sarah Dawson, Christian Mallen, Matthew Gouldstone and Robert Yarham