Author's response to reviews

Title: Depression and loneliness in Jamaicans with sickle cell disease

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Author's response to reviews: see over
April 14, 2010.

Sabina Alam
Senior Scientific Editor
BMC series journals

Dear Dr. Alam,

Please see resubmission for the manuscript entitled “Depression and Loneliness in Jamaicans with Sickle Cell Disease”. We are grateful for the comments of the two reviewers, attention to which we are sure, has strengthened our manuscript.

Responses to reviewers’ comments are detailed below. We trust that you will find these changes acceptable.

Sincerely Yours,

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Comments: Reviewer 1

1. The authors identified the problems with the use of the BDI to diagnose depression. They should explain how the use of this instrument affects reported prevalence rates. Depression scores reported across the range would strengthen paper: Were most participants mildly, moderately or severely depressed? Did severity impact loneliness scores?

Author response: There is no doubt that in-depth semi-structured interviews are the best means of diagnosing depression, and use of an instrument such as the BDI may cause overestimation of the prevalence rates of depression. A higher cut-off allows greater specificity to the diagnosis. Range for the depression scores have been added. A histogram (Figure 1) has been added to show the distribution of depression scores in those with SCD. Higher depression scores were associated with higher loneliness scores (Page 11, Results).

2. How was the control group recruited?

Author response: This has been stated now in the manuscript (Page 6, Methods and sampling).

3. How was the sample lost to follow up similar or different than participants?

Author response: We do concur that use of a cohort produces a survival bias as the severity of illness is or maybe different in those who have died or moved away from those remaining for follow-up, and we accept this as a limitation (page 15, Discussion).

4. How do we distinguish loneliness from the social isolation accompanying severe depression?

Author response: In this study, we did not measure social isolation accompanying severe depression. However, As the two scales showed a very minimal correlation, it suggests that the impact of social isolation on loneliness might be minimal as well (Page 10, Results).

5. Which subscale scores for the loneliness scales were elevated? Which relationships were most impacted or were all types of relationships impacted the same?

Author response: Subscale scores were not measured for loneliness in this study, as the shortened UCLA-8 was used here.
6. Descriptive analysis of data was acceptable. However, the results may be overstated. In an observational study, one can describe associations but not causality? Authors describe specific risk factors for depression and loneliness. Please describe how your data supports this.

**Author response:** We concur and the manuscript reflects the changes.

7. Discussion overstates findings. Associations versus predictors of depression and loneliness.

**Author response:** We agree and we have made these changes to the manuscript.

8. Discussion should be expanded: Thoughts about differences in SC vs. SS findings? Literature discussing the differences in coping with illness observed in SC? More discussion regarding distinctions and confounding in determining depression from loneliness? What are the implications of these findings and how does this affect treatment? Why are these findings important? Future directions? Do the authors have screening and treatment recommendations?

**Author response:** We agree with these comments and have made an effort to address them throughout the manuscript.


**Author response:** We totally agree and this important study’s findings have been cited in the article (Page 16, Conclusions).

10. Should include a description of the psychometric properties of the instruments used for the studies.

**Author response:** This has been added to the manuscript (pages 7-8, Data collection).
Comments: Reviewer 2

INTRO / LIT REVIEW
1. Was concise and to the point yet fully explanatory of all aspects of the study. However, Lipps & Lipps & Lowe have done some work on loneliness in Jamaicans…you might find his findings worthy of some mention here.

Author response: Lipps & Lowe have used the Loneliness Scale in a study validating the Beck Depression Inventory in a study with University students (Cited in this study). We could find no other work on loneliness in Jamaicans.

METHODOLOGY
2. More information on how the depression score of 17 was established as the cutoff

Author response: This has been addressed in the manuscript (Page 9, Statistical analyses).

RESULTS
3. Mean depression scores = 9.19 and 6.4 for controls…would have been good to report scores of “depressed” categories as these were significantly different

Author response: This has been added in the manuscript (Page 10, Results).

4. Pearson’s correlation between the 2 scales was 0.39…what were you trying to suggest here? That it provides evidence of convergent? Discriminant validity?

Author response: This provides some evidence that the two scales were not likely measuring the same concept....i.e. they were conceptually distinct in this population. This has been noted in the manuscript (Page 10, Results).