Reviewer's report

Title: Long term life dissatisfaction and subsequent major depressive disorder and mental health

Version: 1 Date: 1 March 2011

Reviewer: Inmaculada Gilaberte

Reviewer's report:

This is a part of the longitudinal Kuopio Depression Study (KUDEP) with a baseline study questionnaire mailed to a sample of general population in 1998, and two follow-up questionnaires were mailed in 1999 and 2001. Finally in 2005 a subsample of the subjects was invited for clinical evaluation. A subsample of 333 subjects fulfilled criteria on the three data collection and were included in this analysis. In this population the authors investigated the role of long-term self-reported life dissatisfaction as a predictive factor for major depressive disorder and poor mental health.

The authors have conducted an exhaustive longitudinal study trying to understand the role of life satisfaction in different variables related with mental health. This specific manuscript address the impact of life dissatisfaction on the development of MDD, since it is a interesting point to be able to detect high risk population for MDD, this manuscript is a potentially valuable addition to the literature. Nonetheless, some issues need to be addressed.

Minor Essential revision

In the method section: It is not clear the reason for the inclusion of two subsamples based on self-reported adverse mental symptoms (BDI, TAS) and life dissatisfaction (LS), since along the manuscript it seems that what the authors investigate only the role of life dissatisfaction on the MDD following three study group: long-term life satisfaction group, intermediate group and dissatisfaction group. This aspect need to be clarified.

In the discussion section a main limitation should be added: authors should discuss the lack of a previous structured interview at the beginning of the study to exclude cases of MDD, since the only Structured clinical interview for DSM IV was conducted in 2005. Although in 1999 a self-reported data on previous physician diagnosis of MDD was made, it doesn’t exclude totally cases of MDD. This limitation should be taken account on the whole discussion of the study, since the authors couldn’t be sure that life dissatisfaction is cause of depression. The same group, in fact has published another manuscript (“Self-reported life satisfaction and recovery from depression in a 1-year prospective study” Acta Psychiatr Scand 2001; 103: 38-44) in which conclude that life satisfaction is strongly affected by depression.
Another limitation that should be included in the discussion is the gap of data on life satisfaction from 2001 to 2005. Since the life dissatisfaction burden has been collected only between 1998 and 2001, and then in 2005 this gap should be discussed if the authors establish the concept of long-term dissatisfaction as significantly related to MDD.

Finally, in the discussion, the authors should suggest which the clinical importance of their findings is, and what are the main implications of the study for the clinical practice.

In the Conclusions section, Since the LS scale has been well validated in previous manuscripts (Koivumaa-Honkanen et al. “Life satisfaction and depression in a 15-year follow-up of healthy adults”. Soc Psychiatry Psychiatr Epidemiol 2004; 39: 994-999), the sentence about the 4-item LS scale as a valid global well-being indicator should be deleted of the conclusions.

Discretionary Revisions
Title: It would be more precise according with the content to include “poor mental health” instead of “mental health”.

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'