Reviewer’s report

**Title:** Low intensity blue-enriched white light (750 lux) and standard bright light (10 000 lux) are equally effective in treating SAD

**Version:** 2  **Date:** 28 September 2010

**Reviewer:** Paul Desan

**Reviewer’s report:**

The authors previously found evidence in a small study that bright light and bright light with more blue energy were both highly effective in sad. Here another small study suggests that even much dimmer light with more blue energy is as effective as the bright light. This is a useful study and definitely should be published by your journal, but straightforward improvements in the draft are needed.

The weakness of the study is that there is no placebo. Studies with complex placebo have more placebo response, and in this study where subjects come for treatment everyday placebo effects might be strong. In fact, perhaps just coming to the center in the early morning is effective. This weakness needs to be explicitly noted and discussed. Do the authors have any previous studies with this method where subjects did come in in the same way to receive a true placebo treatment?

Table 1 could be a sentence in the text. The methods refers to calculating proportional response (proportion from baseline?) but this is not apparently used in the analysis. It is not clear what effect Cohen’s d refers to: would delete. Is the analysis of the SIGHSADs a repeated measures ANOVA or a MANOVA: please clarify. The section on Impact of Baseline severity is not useful, could reflect regression to the mean effects, and distracts from the conclusion of the study: it should be deleted. Figure 2 might include SIGHSADs and fewer questionnaire items.

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

**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.