Reviewer's report

Title: Comparison of the CES-D and PHQ-9 depression scales in people with type 2 diabetes in Tehran, Iran

Version: 2 Date: 14 February 2011

Reviewer: Nicholas T Van Dam

Reviewer's report:

1. Major Compulsory Revisions

While the authors acknowledged several of my comments, they have not addressed them in the manuscript nor have they provided, in my opinion, sufficient evidence that would remove the necessity of responding to them in the manuscript.

1.1 Whether or not it is 'recommended' that vulnerable groups be screened for depression, this does not negate the fact that depression treatment does not seem to improve the management of diabetes. (Pouwer, 2009). I am not saying that this patient population should not be screened for depression – as depression would logically further complicate pre-existing conditions like diabetes. I recommend the authors revise their statement to say that accurate assessment of depression in diabetic populations is important to the treatment of depression in this sample and may improve diabetes management.

1.2 I appreciate the authors' response regarding their comprehensive search of Iranian publications. I think it would greatly strengthen the manuscript if the authors emphasized, in the manuscript, the fact that a very good screening measurement tool (CES-D) has only been explored once in an Iranian population. This may coincide with a slight shift in the overall tone of the paper, emphasizing accurate depression assessment in Iranian and diabetic populations as the main focus.

1.3 The previous issue has been corrected.

1.4 The authors make a strong case for their findings regarding the high prevalence rate of depression in the Iranian population. It would strengthen the manuscript if the authors pointed out in the manuscript that due to the high rate of depression in this population and its relation to increased complications in diabetes, accurate screening is critical. I recommend the authors provide some of the citations in the manuscript to provide evidence for readers that these rates are in fact typical.

1.5 Again, my concern is that the authors are refuting my argument with a statement that is based on authority (the recommendation of unnamed studies) and the suggestion that this should be part of common primary care. I would agree that this screening is important. However, I think it would greatly
strengthen the manuscript to state that generally, assessment of depression in primary care is problematic (Mitchell et al., 2009). This argument has broader appeal and carries over into specialized areas such as general practitioners working with a diabetic population.

1.6 I appreciate the authors consideration and understand that my previous request in this regard was outside the purposes of their study. I withdraw my prior recommendation in this regard.

Minor Essential Revisions

2.1 There are still errors in the reference format. Introduction, paragraph 2, 2nd sentence. The period appears prior to the reference numbers.

2.2 amended appropriately

2.3 This sentence, Intro, 3rd paragraph is still difficult to follow. “Despite its relevance to the course of diabetes and its chronic character, depression is recognized and treated appropriately in fewer than 25% of depressed diabetic patients….” Is depression not recognized in those who are already KNOWN to have depression and who are diabetic? Or is this referring to an estimated proportion of depressed diabetics that aren’t accurately diagnosed? Or is this referring to diabetics who might have depression but it cannot be determined because of poor diagnosis?

2.4 I was not recommending that the reviewers provide the exact reference for the SCID. I do not think this is necessary. I was suggesting that the reviewers might acknowledge in the manuscript that some may think there are other gold-standards of assessment.

The rest of the revisions are acceptable.

Level of interest: An article whose findings are important to those with closely related research interests

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

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare I that I have no competing interests.