Reviewer's report

Title: The effect of ethnicity on prescribing practice and treatment outcome in inpatients suffering from schizophrenia in Greece

Version: 2 Date: 6 December 2010

Reviewer: Evangelos Karamatskos

Reviewer's report:

This interesting retrospective study by Douzenis and colleagues is the first investigation of the effects of ethnicity in prescribing and treatment outcome in schizophrenic in-patients in Greece. The study-design focuses on medication-class rather than dose. 90 Greek and 63 non-Greek inpatients (81 m, 72 f, age-range: 19-59) from the attic area were included in this study. Social and psychological functioning was assessed by GAF-scale, psychiatric symptom severity was assessed by BPRS-E. No association between ethnicity and use of mood stabilizers/benzodiazepines/FGAs/polypharmacy as well as BPRS/GAF-score on discharge was observed. The authors report also, that significant differences in use of SGAs were found, with less Greek patients receiving SGAs. On the other hand non-Greek patients received far less SSRIs-SNRIs compared to Greeks. The present study adds an important socialmedical finding for Greece, since Greece has become increasingly a destination for immigrants. The methods are generally sound and the paper is well written.

Major Points
Authors should make a comment on the different use of benzodiazepines. According to table 1 the difference seems to be enormous and significant across ethnic groups. On the other hand in the Results, second paragraph authors claim that no significant difference was found.

Minor Essential Revisions
Participants suffered from diverse psychotic disorders, including schizophrenia and schizoaffective disorder. I am missing a statement regarding the exact diagnostic classification of the investigated population. Since the usage of mood stabilizers and SSRIs-SNRIs is discussed, the percentage of schizoaffective patients in each subgroup is of great interest. A significant difference may influence the interpretation of these findings. In addition to this, there may not be differences in the BPRS-score on admission and discharge, but depressive or negative symptoms could differ between the two population groups and could also explain the different use of SSRIs-SNRIs. Is there an association between sub-points of the BPRS and the use of any medication? It would be very interesting to investigate this, regarding that ethnical background can affect the symptomatology of a disorder. Maybe the use of the well established PANNS-scale could answer these issues more precise.
I can’t imagine why the costs of SSRIs-SNRIs and the poor economic status of foreigners can affect the prescription behaviour of a psychiatrist, since generic medicaments (SSRIs) are available and low priced. In this case, shouldn’t there also exist differences considering the prescription of SGAs (since several SGAs are still patent-registered)?

Were other antidepressants except SSRIs-SNRIs used in this study?

Minor issues not for publication

There are some spelling mistakes and a great number (> 40) of punctuation/false space-setting (no-space between words, double-space between words, numbers, sentences, parentheses etc.).

Examples: significance written as ,063. It should be written as 0,063 or .063. (several times)

“Typical” and “atypical neuroleptics” should be replaced with the terms FGAs/SGAs.

Discretionary Revisions

Greece received a large amount of immigrants in the last 30 years and (institutional) racism against immigrants from a poor social-economical-educational background (Kurdish, Albanian) is possible. On the other hand, the membership of Greece in the EU raised the number of well educated and socioeconomic respectable non-Greeks living primarily in the area of Attica (Germans, British, French etc.). These should be commented by the authors, especially if the population sample included “western foreigners”.

Declaration of competing interests:

I declare that I have no competing interests