Reviewer's report

Title: Posttraumatic stress symptoms and health-related quality of life: a two year follow up study of injury treated at the Emergency Department

Version: 2 Date: 24 April 2011

Reviewer: Stefan Büchi

Reviewer's report:

General comment
This is a well written and soundly presented paper on PTSD in a large sample of ED patients two years after contact with the ED. The level of scientific reasoning is excellent and the writing style is very good.

The topic of assessing the prevalence of less severely injured patients is of interest and could contribute to the body of knowledge in the PTSD-literature. Unfortunately the used instrument for the assessment of PTSD is not suited for diagnosis of PTSD.

Major revision
As prevalence of PTSD can be only assessed by a sound clinician administered diagnostic interview (e.g. CAPS) but not by a self report measure like IES no diagnostic information can be drawn by the presented data. Therefore no prevalence rates can be established in this study.

I appreciated very much how precisely the authors mentioned the difference of PTSD and „posttraumatic symptoms indicative of PTSD“. Also the title of the paper has correctly set „posttraumatic symptoms ....“ But nevertheless in the introduction as well as in the discussion the authors compare there number of prevalence data of „indicative of PTSD“ with information which have all been established by a clinician administered interview. This is not correct and the mentioned number of 4% has no clinical relevance. As mentioned IES is not acceptable as a diagnostic tool for PTSD, independent of the chosen threshold.

In my opinion the information concerning PTSD-symptoms and HRQoL in this large sample of ED patients is very interesting. I would advice to present this data rather as a correlation of continuous IES data, than dichotomous „PTSD vs. Non-PTSD“ information. This means that the paper should be modified and less focus given on prevalence of PTSD in the introduction and discussion. Possibly objective 1 (prevalence rates) should be omitted and the paper focused on objective 2 (association of PTSD-symptoms and HRQoL). The problem of he lack of a CAPS interview should be discussed as an important shortcoming of this study.

Minor revision
Introduction: Line 3: Mention, that in lit. 1 the time criteria for PTSD is not
accomplished.

Primary data analysis: Line 2: …. missing IES were imputed by substituting the median value of nearby 5 points. – could you please explain this technique?

Table 2.: indicate n = for EQ-5D and HUI13
Table 3.: indicate n= for EQ-5D and HUI13
Fig. 1: indicate n=; PTSS = ? (legend)
Fig. 2.: indicate n=; PTSS = ? (legend)
Fig. 3: indicate n= for all assessments (text section). PTSS = ?

**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.