Reviewer's report

Title: Remission in Schizophrenia: Survey of Clinical and PsychoSocial Dimensions.

Version: 1 Date: 29 March 2012

Reviewer: Kelly Buck

Reviewer's report:

1. Is the question posed by the authors well defined? The question posed by the authors is to determine the clinical and psychosocial remission rates in a cohort of community dwelling people with schizophrenia. In addition, the authors also correlate their findings with one variable, medication route. I'm wondering if the authors need to refer to this in the title, something like Clinical and Psychosocial Remission in Schizophrenia: Correlations with medication, or something like that. Also, it needs to be more clearly stated that clinical remission is measured by the RSWG scale, and psychosocial remission using the PSRS. Although this is clearly stated later in the ms, it is quite unclear in the abstract as well as in the Introduction. (Minor Essential Revision)

2. Are the methods appropriate and well described? The methods section should again clearly state what scales are measuring which forms of remission. It also should clearly state who the participants were (MDs, RNs, and Social Workers). Because the PSRS only contains 8 items and it is newly developed, it might be helpful to be included in a table. (Major essential revision)

3. Are the data sound? It's hard to know if the data are sound. Please address why only 4% of social workers completed the survey and nearly twice as many MDs than RNs. Were the results of the MD vs the RN vs the social worker questionnaires significantly different? The ms refers to "area of expertise of case manager" which is not explained; what does this mean? (for example, were MDs considered to be more "expert"? This may not necessarily be the case). Were all healthcare providers/participants provided with the same instructions? (Major essential revision)

4. Does the manuscript adhere to the relevant standards for reporting and data deposition? Explain why those people who were on both IM medications and oral medications were excluded from the analysis. Additionally, the authors might consider that the results may be easier to read the results if they were in a table. (Minor essential)

5. Are the discussion and conclusions well balanced and adequately supported by the data? The first paragraph of the Discussion section would be better placed in the Introduction. It would be more clearly set the stage for the paper, which is lacking. The last sentence of the second paragraph in the discussion needs to be clearer as does the first sentence of the next paragraph. In the abstract, the authors state that the "onset of schizophrenia typically...impinges on developing
social skills often leading to social isolation..." There should be a reference for this statement as the opposite may be true. For example, perhaps negative symptoms interfere with connections with others, which may erode social function over time. (major essential)

6. Are limitations of the work clearly stated? Other limitations that are not discussed include: perhaps it was the regular contact with the person who provided the injection which affected the results instead of the medication itself, or what about employment? Or capacity for metacognition? Did different health care providers rate the patients differently? (minor essential)

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? Yes, however the authors have neglected to include any review of the recovery literature which is essential to be included in a paper of this topic. Specifically, work by Lysaker on rehabilitation, recovery and metacognition, Roe on rehabilitation, Slade, and Davidson should be included. SAMSHA should also be mentioned. (major essential)

8. Do the title and abstract accurately convey what has been found? The abstract needs to more clearly state what was actually done. I would recommend changing the title (see above). (major revision)

9. Is the writing acceptable? The ms needs to be reviewed closely for grammatical errors and clarity. There needs to be more clarity in the abstract and in the Introduction so the reader knows what is in the paper. Some words are used inappropriately, for example the use of endorsed is confusing. Do the authors mean completed instead? Additionally, some of the language is stigmatizing. For example, instead of "suffering from" schizophrenia which implies the person is a victim, it would be better to refer to persons with schizophrenia. Another example is referring to a case manager being "in charge of" a patient which minimizes the person's personhood. Instead, it would be better to state the case manager "works with" to imply the person with schizophrenia is in "charge of" their own life. (major revision)

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

**Quality of written English:** Not suitable for publication unless extensively edited

**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'