Reviewer's report

**Title:** Development of mental disorders one year after exposure to psychosocial stressors in primary care patients with a physical complaint; a cohort study

**Version:** 2  **Date:** 6 February 2012

**Reviewer:** Tara Donker

**Reviewer's report:**

Review of manuscript: Development of mental disorders one year after exposure to psychosocial stressors in primary care patients with a physical complaint

The authors wrote a well-written paper about the onset of mental health disorders after exposure to psychosocial stressors in a cohort of PC patients with at least one physical symptom. However, I do have a few comments that they might want to address.

Major Compulsory Revisions

**Results**

1. Third paragraph, “most psychosocial stressors showed positive association with principal mental disorders”. Table 2 shows 4 out of 10 significant stressors. It might be more interesting to mention which of the stressors were significantly related to the development of a mental disorder at one year.

2. Third para: “we observed stronger associations between psychosocial stressors and depression or anxiety than to somatoform disorders. Table 3 shows no significant relation between the risk of developing a somatoform disorder one year after initial exposure to at least one major psychosocial stressor. The authors might want to state this more clearly in the result section (and discussion section etc).

3. It would be interesting to examine relationships between exposure of a certain stressor with the risk of developing a disorder specifically. if this cannot be examined due to low prevalence, this can be addressed in the discussion section.

**Discussion**

4. As a primary outcome measure in this cohort study, the usage of an accurate diagnostic interview to diagnose mental health disorder is very important. The authors mention their reasons for choosing the PHQ instead of a diagnostic interview such as the CIDI or SCID-I. While the PHQ is a reliable and valid, widely used and easy to administer, it can only be used to establish provisional diagnoses for a selection of DSM-IV disorders. The authors might want to stress that their conclusions drawn in this study are based upon provisional diagnoses and address its limitations.
5. I am not sure about how those questions in the PHQ are phrased, but could it be that you are measuring symptoms of mental disorders instead of psychosocial stressors (e.g. worrying about health as a symptom of Generalized Anxiety Disorder or Hypochondria; thinking or dreaming about... with PTSD, weight and appearance with anorexia)? If this is true, please elaborate on this in the discussion section.

Minor Essential Revisions:
Abstract
1. Results: please explain what principal mental disorders are.
2. Table 3: as far as I know, just a panic attack is not a DSM-IV disorder. Panic disorder w/wo agoraphobia is

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

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

**Declaration of competing interests:**

I have no competing interests