Reviewer's report

Title: Depressive Symptoms in First Episode Psychosis: A One-Year Follow-Up Study

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Reviewer: Tania Lecomte

Reviewer's report:

This is an interesting paper trying to determine the link between depression and psychosis in individuals with early psychosis over the course of 12 months. The authors present a good overview of studies on depression and psychosis. Overall the paper has merit but would benefit from additional details and some edits, mostly regarding the analyses.

compulsory revisions:

- The authors mention that 4 groups would be compared in the analyses – why is that so? Technically the authors shouldn’t have known the number of groups before the analyses were run (?) Where does that number come from and how were these groups defined?

- It is mentioned that trajectories would be found but not trajectory analysis is described (trajectory analyses are somewhat like cluster analyses but across time). Please mention what analysis gave the four groups, or how these were determined.

- It is mentioned that one group ‘stayed depressed’ over the course of 12 months – were the scores exactly the same or did some get worse and others better, while still being depressed?

- In the results section, please indicate the F and t-scores.

- In the discussion, it is mentioned that those who were depressed ‘had equal levels of depression… where can we see this (in numbers)?

- In terms of interpretation, the PANSS negative symptoms and depressive symptoms do somewhat overlap… is it truly that the most depressed are more ‘negative syndrome’ or could this be an artifact of the measures?

- In terms of limits, this study has no qualitative aspect to it – could it be that who ‘stayed depressed’ actually had different reasons to be depressed at each time point, so the depressive symptoms are qualitatively different (e.g. at baseline the person dropped out of school, is depressed because of voices putting him down and at 12 months is depressed because he has to live with the stigma of a mental illness diagnosis)? Even the SCID interview mentions to not rate depression if it occurs after the diagnosis of schizophrenia because it is a ‘normal’ phenomenon to react with depressive symptoms… some thoughts around this idea would be interesting in the discussion.
Level of interest: An article of importance in its field

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