Reviewer’s report

Title: Employing crisis postcards with case management in Kaohsiung, Taiwan: 6-month outcomes of a randomised controlled trial for suicide attempters

Version: 3 Date: 12 November 2012

Reviewer: Greg Carter

Reviewer’s report:

General:
This manuscript reports the results of a RCT of a crisis postcard intervention for the outcome of any or time to first repeat suicide attempt in a clinical population of suicide attempters. The setting is Taiwan – there have been few intervention studies for this outcome in non-western countries. This is an important area for study. The intervention is a new one in the literature, although the title suggests a similarity with other crisis card or other postcard interventions, which may be confusing or misleading.

Major Issues:
1. The analysis is based on a per-protocol analysis not an intention to treat analysis based on randomisation status. (exclusion of n=106 who did not read postcards). This analysis approach represents a major threat to the internal validity of the study. The authors must do an intention to treat analysis before offering the current per-protocol analysis. I appreciate that the authors say this is an effectiveness study rather than an efficacy study. Nonetheless, an intention to treat analysis is necessary before the per-protocol analysis that might in itself be justified as an effectiveness trial. (In the Background the authors indicate that an RCT is the gold standard for evaluating efficacy.)

2. This is a new intervention – very different in style, timing and content to the green card study (crisis cards) and the various postcards studies. This needs to be made explicit in the Background and Discussion sections. The new intervention is also individually tailored to the participant based on the case management assessment and treatments – this is quite different to most other intervention approaches in the literature.

3. Definitions and recruitment methods of “suicide attempters” to the case management system is not clear.

4. The randomisation method is unusual. References should be made to demonstrate the robustness for this approach.

5. Methods: “we inquired about if they read crisis postcards or not at last case management service in study group.” If the postcards were not used/delivered until after the 3 months case management – how could this inquiry be made?
6. No a priori sample size calculation

7. It seems the primary outcome was a binary one – any further suicide attempt - although the time frame for this is not clear. How was this dependent variable determined/measured?

8. Many of the important limitations of the study design, recruitment, randomisation, blindness and analysis methods are not adequately reported.

Minor Issues:

Abstract
It is not clear what the duration of treatment is and what is the duration of follow-up – and which is being used for the primary outcome.

It is incongruous to report a significant lower risk of suicide attempt with a higher hazard ratio of 2.60.

Background
“failed suicide attempts” or even “completed suicides” – is not considered appropriate language in Suicidology studies – use “suicide deaths” or “death by suicide” or “suicide mortality” as needed.

References 8 and 9 are not case management studies

Methods
“This design has contributed to its high retention.” How is this known?

“lethal methods” – should be high lethality methods.

Analysis
The analysis strategy for chi square and univariate and multivariate Cox proportional hazards should be detailed in the methods section.

Results
Says 457 ineligible whilst CONSORT says failure to consent

Discussion
Page 10 line 3-4. Incorrect reporting of findings from references 14,21.
Page 10 – last 2 lines – this point is not clear to me.
Page 11 – line 12-13 – ref 21 was not a postcard study

? any differential mortality rate – might account for some of the differences.

Table 2 – need to report the numbers (n’s) for each stratum in the regression.

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.
Declaration of competing interests:

I have no competing financial interests. I have published research using a postcards intervention for suicidal behaviours.