Reviewer’s report

Title: Predictors of psychiatric hospitalization during 6 months of maintenance treatment with olanzapine long-acting injection: post hoc analysis of a randomized, double-blind study

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Reviewer: Istvan Bitter

Reviewer’s report:

The authors address an important practical question, namely the predictors of hospitalizations during maintenance treatment with the long acting formulation of a frequently used antipsychotic, olanzapine.

The manuscript is clearly written, the main message (in addition to prior hospitalizations suicidality at baseline is a strong predictor of hospitalization) is important for the praxis.

I have only a few comments/questions. (MER: minor essential revisions; DR : Discretionary Revisions)
1. The 1:2:1:2:1 random assignment would deserve a short explanation (DR)
2. “Suicide threat” sounds stigmatizing. I suggest to replace the term (e.g. with suicidality?) and define it. (MER)
3. What does it mean (suicide threat) “before baseline”? When ? (MER)
4. “Age ranged from 38.8 to 39.5 years..” Is it correct? Looking at the ages of the hospitalized (42.1. ,SD 9.6) and nonhosiptalized patients (38.8, SD 11.4) (p.9) it seems to be an error. (MER if it is an error)
5. As a feature of the design the patients were “stabilized” at the baseline, thus had low PANSS total scores, which limits further changes and explains the weak association with the risk of hospitalization – maybe it should be emphasized. (DR)
6. Was the duration of the hospitalization really 1.5 versus 2.9 days? They are extremely short – this issue would need some explanation. (MER)
7. The lack of significant difference in the efficacy (preventing hospitalization) between the oral and LAI formulation of olanzapine is not surprising considering the studied patient population (participants of a double blind RCT). Two recent papers (published after or round the submission of this manuscript) might help in better discussing the differences between RCT-s and real life (DR):
   Kirson et al: Efficacy and Effectiveness of Depot Versus Oral Antipsychotics in

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:

Istvan Bitter has been an advisory board member/consultant/lecturer for and/or received research support in the last 5 years for Astra-Zeneca, Bristol-Myers Squibb, EliLilly, EGIS, Janssen, Lundbeck, Novartis, Pfizer, Richter, Roche and Schering-Plough.