Reviewer's report

**Title:** Criteria for symptom remission revisited: a study of chronic patients affected by schizophrenia and schizoaffective disorders

**Version:** 1  **Date:** 21 July 2013

**Reviewer:** Mark Opler

**Reviewer's report:**

Summary: This is an excellent study which explores the Remission criteria/definitions using the PANSS with an eye towards essential statistical endpoints, e.g. PPV, NPV, sensitivity and specificity. The authors have chosen to pursue a carefully balanced strategy, looking into the roles of functioning (as measured by the PSP), cognition (via the BACS) and symptomatology through various combinations of PANSS items including the PANSS total score. This important publication has a number of items that need to be clarified as well as some small errors that can easily be corrected before publication. It is strongly advised that these changes be made to strengthen the paper before final acceptance.

**Minor Essential Revisions:**

1. The authors need to add some additional items into the methodology sections;
   - While they describe the structured diagnostic interviews (SCID-I and II) they must also include more information on how PANSS data was obtained, i.e. did they utilize the SCI-PANSS?
   - Were full, valid translations of all instruments utilized in Italian, obtained from the appropriate sources?
   - The references for the PANSS should include the most up-to-date version of the PANSS Manual to help assure readers that the version of the scale being utilized is accurate.
   - What was the inter-rater reliability of the interviewers for the PANSS (e.g. ICC?)
   - Even a brief notation that training was carried out on key measures would be helpful to further give readers confidence in the data.

2. **Interpretation of Data and Conclusions:**
   While the conclusions are supportable on the whole and the authors note all of the major caveats, it would be interesting and worthwhile for them to add some additional thoughts around the following;
   - They correctly note that the remission criteria have a time- as well as a severity component. More should be said about how their conclusions would or would not be supported if the time component was taken into account, i.e. is there any reason to believe that the conclusions would be maintained on the whole if the
design was longitudinal instead of cross-sectional?

-While it is reasonable to utilize the intellectually-derived subscales (e.g. Positive, Negative and General) could the authors perhaps add any justification for *not* utilizing any of the widely accepted factor models into their strategy? As they have already obtained all of the necessary data, such an analysis would be relatively simple.

3. Clinical Implications:
The authors make a strong case that the statistical findings support the use of a longer, more rigorous assessment vs the remission criteria established by Andreasen et al. The finding is both intuitive and well made; they note also that the clinical application of longer assessments is challenging. It would be advisable that they clarify the time commitments involved in assessing remission according to each of the approaches, e.g. the RSWGcr requires XX minutes of assessment time in our estimation and the PANSS-PNScr requires XX minutes to complete etc.

4. Other Items:
-Is there any reason to believe that the data would have been decidedly different if they have utilized *only* the 8 remission items?
-Did the authors obtain informant data using any systematic tool/questionnaire both for the PANSS and PSP?
-Were caregivers, caseworkers, or treating clinicians queried as a standard part of the PANSS assessment?

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

**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 declare that I have no competing interests.