Reviewer's report

**Title:** Self-Reported quality of life in adults with attention-deficit/hyperactivity disorder and executive function impairment treated with lisdexamfetamine dimesylate: a randomized, double-blind, multicenter, placebo-controlled, parallel group study

**Version:** 4  **Date:** 10 April 2013

**Reviewer:** Cesar Soutullo

**Reviewer's report:**

I think this is an interesting paper that would be probably suitable for publication provided the authors do the required changes (neither minor nor major, just clarifications)

This is an interesting paper on the effect of LDX on ADHD Self-Reported Executive Function using the BRIEF.

They also include secondary outcomes of measures of QoL using AIM-A and (in some patients but not all) AAQoL. The results of the efficacy using the ADHD-RS & CGI-S were published elsewhere.

I have some comments for the authors:

**Compulsory Revisions**

1. The title of the paper "self-reported QoL...and EF impairment... talks first about a secondary outcome and does not correctly reflect the Self-reported measure of the EF deficits. I think the title should be focused on the primary outcome: EF deficits using the BRIEF, not on the QoL. Something like "Self reported Executive function impairment using the BRIEF, and QoL in adults with ADHD....is probably more accurate.

2. Key inclusion criteria requires that patients with ADHD HAD EF deficits at baseline. This is mentioned in the limitations section, but I’d like to know in the method section, what % of the total sample of ADHD were those with EF deficits. This is important, and should also be mentioned in the title "In patients with ADHD with EF deficits...", because results may not apply to all ADHD adults, but only to those with EF deficits.

3. Another limitation that is not mentioned is the lack of correlation in the literature between self-reported EF (asesses with the BRIEF), and the neuropsychological EF deficits, assessed with neuropsych testing. This has been described in the literature for example by Henin et al and other groups, please add this part to the discussion and the references. From the results it is difficult to say if the correlation between improvement in self-reported EF is due to better insight in those who responded, or to a true improvement in both areas, this should be discussed.
4. About the QoL measures, this is a secondary measure of efficacy, and also not all patients completed the AAQoL, thus the results are weaker. Authors should indicate the % of the sample that completed the AAQoL, I could not clearly find it.

**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:**

C Soutullo

Research funds, advisory boards/consultancy, speaker bureau or royalties:


Stocks: None

Non-financial competing interests: none