Reviewer’s report

Title: Treated incidence and Baseline Characteristics of Substance induced psychosis in a Norwegian catchment area.

Version: 1 Date: 30 July 2013

Reviewer: Tania Lecomte

Reviewer’s report:

This article essentially aims at comparing individuals with first episode substance-induced psychosis from first episode psychosis with and without substance abuse by comparing them on symptoms and functioning. The goal is interesting and there is much work to be done in order to better distinguish those with substance-induced from those with a primary psychotic disorders, but the paper currently does not really answer any of the essential problems in the domain.

Minor essential revisions:

1-For instance, the authors mention that many individuals initially diagnosed with SIP will eventually be diagnosed with a primary psychotic disorder and that this might be due to diagnostic problems or to the evolution of the illness – then why is it important to distinguish the two groups, especially using the diagnostic system that is criticized? Furthermore, The SCID is not very good at distinguishing someone who abuses a drug that increases the likelihood of developing schizophrenia (and is hospitalized for psychosis) from a brief psychotic episode in someone who abuses cannabis or methamphetamine. The article should be more critical of all these problems and offer a better justification for their study.

2-In the paper, after the description of the SCID as the diagnostic measure, it is mentioned that in the case of ‘refusers’ – does that refer to people refusing to do the SCID or to people refusing to stop using drugs for 4 weeks? This needs to be clarified. Were all the participants hospitalized and street-drug free for at least a month? When were participants assessed (in acute phase or after stabilization)? Who conducted the assessments? Was there any form inter-rater reliability checks?

3-The rate of study refusals are very high – can you please explain if and why you believe the results are representative of the larger sample? This should be indicated under limitations. Also, any reason why people would refuse to participate? Why were 5 people from the North included? Are their profiles similar to the others?

4-Given the high rate of psychosis NOS diagnosed in your PS sample – this needs to be discussed more (wrong diagnosis, assessor really hesitant between SIP and PS?)… the results of the study are not as solid if the diagnoses used to split the groups are not clear and well-defined. This is an important limitation
given the group comparisons… In fact, the PS and SIP groups appear quite similar in many ways …

5-There also needs to be more of an understanding of the sample. Other studies with substance abusers with psychosis have found extremely high rates of trauma and PTSD in that sample, which could explain somewhat why it is so hard to engage them in treatment. The discussion would benefit from more links to the literature, in order to better understand the results.

Smaller points:

6-In the discussion, there is reference to a study using the BPRS (McKetin) – I haven’t checked the article but the BPRS is usually used for the past 2 weeks, maximum past month, never for the past year. If this is really what was done, the results are likely not reliable.

7-In the version I had, it jumps from table 2 to table 4 (no table 3). In table 4, does a higher score mean worse academic performance? This result could also be discussed a bit because drugs during school impede academic success, and some people who later develop schizophrenia also have difficulties in school… Given we don’t know the age of substance abuse onset (and if they used at school) this result is not all that clear or well-explained.

8-Please re-read the article, a few language errors here and there (e.g. referred to our service in from August…).

**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.