Reviewer’s report

Title: Are psychosocial difficulties common across brain disorders?

Version: 2 Date: 15 June 2012

Reviewer: Annet Kleiboer

Reviewer’s report:

Major Compulsory Revisions

1) The title should correspond better with the content of the paper

2) The background, discussion and conclusion of the paper do not correspond with the research question and the way the data was analysed. The background and conclusion suggest that the authors are interested in identifying shared psychosocial difficulties and their relationship with health outcomes in people with a wide variety of brain disorders. The research question and analyses focus on the relationship between a set of general psychosocial difficulties and their relationship with health outcomes across a wide variety of brain disorders. The research question and analyses do not provide information on shared psychosocial difficulties across disorders.

The authors should match background, research question, analyses, discussion, and conclusion.

3) Rationale: In the background, the authors criticise previous studies for focussing on specific brain disorders or simple combinations of one or two of them. It is not clearly described why the authors have combined a wide variety of brain disorders (both psychiatric and neurologic). It should be made clear in the introduction (1) what the rationale is for combining such a wide variety of common brain disorders, (2) what potential overlap regarding psychosocial difficulties the authors expect between the different brain disorders and why, (3) what differences they expect and (4) what the differences may be with other (non-brain) disorders, to provide a more solid background for the study.

4) Background: The authors were interested in predicting a change over time in health outcomes from a set of psychosocial difficulties. It is not clear why they would expect a difference in the 12 weeks following baseline. The courses of the included diseases are very different and the participants were not recruited at a specific moment in their disease trajectory. For example whereas psychosocial difficulties may predict health outcomes shortly after stroke, there is no obvious reason why they would predict health outcomes in migraine.

5) Methods (design) section: The follow-up period for the study was set at 6 weeks and 12 weeks after baseline but the time points were irregularly spaced and the actual times in days from baseline varied widely (10-151 days for T1 and 17-188 days for T2). You can control for this in the analyses but it remains a difficult problem to deal with. In addition I expect that the delays in follow-up are not random (ie I expect that time lags may be related to specific brain disorders
or patient characteristics). The authors should explain more clearly why this is not a threat to the validity of the results?

6) Recruitment procedures should be described better (where recruited, how, when).

7) Results: If the aim is to identify a set of shared psychosocial difficulties across brain disorders it would be necessary to compare health outcomes and psychosocial difficulties between diseases.

8) The discussion and interpretation of the results should be adjusted according to the comments mentioned above (especially comment 2-4).

Level of interest: An article of limited interest

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:

I declare that I have no competing interests