Reviewer's report

Title: Exploring health-related quality of life in eating disorders by a cross-sectional study and a systematic review

Version: 2

Date: 3 December 2013

Reviewer: ANA R. SEPULVEDA

Reviewer's report:

This paper reports the results of a cross-sectional study of 80 female ED patients between 13-61 years of age (an heterogeneous group; mean=28 years). The authors have two different aims for the study, which is then presented somewhat awkwardly in the Results and Discussion sections. Firstly, to explore whether HRQoL differed among ED subgroups at the beginning of the psycho-nutritional programme Veneto (Italy), and the second aim was to investigate the effects of comorbid DSM-IV diagnosis, setting of care and history of previous treatment on self-perceived HRQoL in ED patients. Another aim of this study was to do a systematic review of the HRQoL (scale of 26-items that measures subjective perception of quality of life) in ED patients. The issue of eating disorders and quality of life are very relevant for treatment outcomes and are a topic of interest in this clinical field. However, the study presents several weak points related to number of conceptual and methodological problems. I do not believe it is suitable for publication as presented in its current form.

1. Is the question posed by the authors well defined? No, the study would require dividing the different aims into two different studies (recommended study 1 and study 2)

2. Are the methods appropriate and well described? Both could be better explained following the suggestion above.

3. Are the data sound? If presented in two studies, the data would be better explained, now they are fairly limited.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition? The data follows presentation standards.

5. Are the discussion and conclusions well balanced and adequately supported by the data? Discussion and conclusions would be more coherent if the paper is divided into two studies. At the moment it is somewhat chaotic and difficult to follow.

6. Are limitations of the work clearly stated? The data of the cross-sectional study is correct, however the systematic review requires more in depth discussion.

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? Yes, the authors knowledge the topic and
appropriate referencing is included.

8. Do the title and abstract accurately convey what has been found?

9. Is the writing acceptable? Yes

I have thoroughly gone over the manuscript and it would be necessary to do several and relevant amendments:

Major Compulsory Revisions

1. No data are reported about how the comorbidity diagnoses of patients were made. Were they done by clinical interview by health care professionals or a revision of medical history for each patient?

2. In the systematic review section, the authors conclude that the SF36 is the most widely used instrument to assess patient’s quality of life. Why was the HRQoL used then? Was the systematic review done after the cross-sectional study?

3. I would recommend dividing the paper into study 1 and study 2. Therefore aims, method and results would be distributed differently in the manuscript, and hence, the discussion would also be clarified. The Discussion and Conclusion require developing and expanding more. For example, Why haven’t differences been found for HRQoL between inpatients and outpatients?, or patients with comorbidity and those without?, nor correlations with illness duration. This should be addressed and discussed. Furthermore, regarding ED diagnosis; the revised articles report differences in life quality between BED and obesity and AN and other ED diagnoses, while in the current study no differences are reports. Why is this? Why in the SR table are the patient’s clinical data not reported (comorbidity, illness duration, type of treatment) so as to homogenise the comparison and discussion of the results.

Minor Essential Revisions

1. On the 5th line of Discussion section, please correct “outpatients and inpatients.”

2. Add notes below the Systematic Review Table in order to make the table more legible.

3. Table 1b: DSM comorbidity among AN group 7/33? Is this correct?

4. Table 1b: I think it may be better to use percentages instead of N.

5. Are there any suggested cut-off points for the instrument? Were they used? Perhaps significant differences between groups (ED subgroups, inpatient and outpatient groups) could have been found amongst patients that reached the HRQoL cut off point and those that didn’t.

6. The means and SD for questionnaires are missing in the SR table. Without
these results between studies cannot be carried out.

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

**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