Reviewer's report

Title: Polypharmacy in Psychiatric Practice

Version: 1 Date: 4 April 2004

Reviewer: Michael Linden

Reviewer's report:

General

The problem of polypharmacy is an old one. As the authors summarize, it is difficult to come to a judgement on the appropriateness. In any case more research is needed. The question is, whether the present paper can help to give new information or add to clarify the problem. There are several points which should be revised.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

This paper does not deal with polypharmacy as such because the rates for antidepressants or neuroleptics do not suggest that there is a major problem. The paper is on an astonishing high rate of benzodiazepine medications (87,3 % of patients in total or 110,2 in substance abuse patients or 91,5 % in neurotic disorders) which is the primary source of polypharmacy. But no information is given why this is so on Gran Canaria. The focus of the paper and the title must therefore be changed.

No information on the treatment setting and type of patient care is given. This is a major factor influencing prescribing.

The initial ethymological explanations can be omitted.

It remains unclear who made the diagnosis in which way. Reference to ICD-10 does not explain how it was done.

It should be made more explicit that in psychopharmacology we never treat illnesses (ICD-10) but according to Freyhan “target symptoms”. Therefore information of the syndromes which are treated would be necessary. Diagnoses to not help.

All tables must be mentioned in the result section.

Global results are reported without giving the data (e.g. regression analysis, polypharmacy classes)

The tables are in some part difficult to understand (difference between count, response and patient)

The explanations for polypharmacy do not mention medical decision making and that any treatment has an individual history.

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No