Reviewer's report

Title: Polypharmacy in psychiatric practice in the Canary Islands

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Reviewer: Michael Linden

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The main problem with the present paper still remains, that the results are difficult to interpret: The authors have added some information on the treatment setting and type of patient care, but have not related this to prescribing. Different from what the authors state, there is quite some literature on the epidemiology of prescribing, including polypharmacy and it always shows how dependent this is on settings, specialty of the prescriber, regions, or year of study. These are major factors influencing drug selection and prescribing.

They have discussed that a diagnosis is not enough to understand why a drug is prescribed, especially when it comes to polypharmacy, which is typically guided by the spectrum of symptoms in an individual case. But there is no information on why the drugs have been prescribed, no is discussed that all treatments have an individual history. So only rather crude factors, i.e. diagnosis, age and gender are taken into account. The first is pseudo-reliable and not based on standardized assessments. For the latter results are reported which contradict most other studies where females and the elderly are found to get more psychotropics. This points to some peculiarities in the present study which are not explained.

No changes have been made in respect to the following points:

The initial ethymological explanations can be omitted.

Statistical results should be reported with all necessary details (e.g. regression analysis)

Polypharmacy classes, i.e. combinations should be reported.

The tables are difficult to understand and be rephrased (what is count, global use, or total response)

In summary, the question remains, what conclusions of general importance can be drawn from the data apart that it has again been replicated that polypharmacy is a widespread phenomenon and that benzodiazepines are widely prescribed in the Canary islands.