Reviewer's report

Title: Acute Weight Gain, Gender, and Therapeutic Response to Antipsychotics in the Treatment of Patients with Schizophrenia

Version: 1 Date: 7 October 2004

Reviewer: Douglas Noordsy

Reviewer's report:

General: Well written overall, with few confusing statements.

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

1) Address the possibility that weight change is a proxy for treatment adherence, which could explain the relationships found. Treatment adherence is not mentioned in this manuscript. Was it measured?

2) Address the possibility that acute associations between weight gain and functional outcomes may change over time as greater weight gain accrues. This may explain disparity between shorter term, prospective studies and longer-term studies discussed on pages 16-18. This is acknowledged as a limitation of the study on pg 19, but needs to be included in the earlier discussion as well. Why was the acute treatment period chosen, and not longer term data?

3) The authors do not address the impact of multiple comparisons on the meaning of their statistical findings. They do not specify what p values were chosen to indicated statistically significant differences, and how.

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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)

1) Table 1: Should clarify if p values refer to difference between women vs men, or all patients vs women vs men

2) Pg 4, middle: should include aripiprazole in list of newer antipsychotics

3) Pg 10, bottom: "Nearly 18%" is unnecessary & confusing

4) Pg 12, top: Associations with weight and BMI in Table 2 are not mentioned.

5) Pg 13, top: "every one-kilogram...improvement" - at six-weeks should be specified.

6) Pg 14, last PP, 1st sentence is confusing. Be more specific.

7) Pg 15, Discussion, 3rd sentence and abstract state "stronger link observed in the olz than the hal treatment group". However, this finding that is contained in Table 3 is never mentioned in the results.
section. Please add.

8) Pg 16, middle: "were descriptively larger" is vague. What do you mean?

9) Table 2. Greater specificity on what footnotes mean.

Discretionary Revisions (which the author can choose to ignore)

1) Page 18, discussion of causality: Recently reported associations between antipsychotic treatment and prevention of brain tissue loss deserve mention. While brain tissue mass may be a small contributor to total body weight, the possible relationships between fatty acids that comprise neuronal membranes, symptoms, and lipid metabolism hint at links that would be of value to the reader to consider, if clearly presented as speculative.

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 importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I am working with some of the authors on another manuscript.