Author's response to reviews

**Title:** Factor Analysis of the Zung Self-Rating Depression Scale in Patients with Major Depressive Disorder in Primary Care.

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**Author's response to reviews:** see over
Dear Dr Lolu da-Silva,

Thank you for considering our manuscript for publication in BMC Psychiatry. We have revised the manuscript based on the comments from reviewer T Kitamura. A point-by-point response to the comments is given below. The new text in the revised manuscript is shown in **bold type** for clarity. We hope that the revised manuscript and our responses are satisfactory to you.

Hope to hear from you soon.

Kind regards,

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Point-by-Point Responses to Reviewers’ Comments

Reviewer: 1

**Comment #1:** Previously I recommended the use of a confirmatory factor analysis (CFA). The authors, however, avoided it and rather used an exploratory factor analysis (EFA) using a portion of the participants and then used the other portion of them to conform the repeatability of the factor structure. However, I do not think this procedure is equivalent to the goodness of fit of the factor structure to the actual data. This can only be assured by the use of a CFA. I strongly recommend the authors just to write GFI, AGFI, CFI, and RMSEA of their three-factor structure. This will suffice.

Response: We thank the reviewer for this comment. We have performed a CFA with 25% of the sample. The method used and results obtained have been included in the revised manuscript pages # 5, 6 and 8.

Since the data are ordinal we could not assume the multivariate normal distribution model therefore the least-squares mean method was chosen instead. In this case the program used SAS v9.1 does not calculate the goodness-of-fit indexes based on the chi-square distribution (RMSEA and CFI).

We have calculated and added the indexes: GFI, AGFI and RMR of the 4-factor and the 3-factor structures in the results page #.

**Comment #2:** Does the following sentence make any sense? On note a 3-factor solution was tested using the same statistical approach and rejected since the 3-factor structure emerged explained less of the total variance (3.3%), presented items loading in more one the factor and items with low factor weights (< 0.25).

Response: We have clarified it in the revised manuscript page # 8.

**Comment #3:** The authors may wish to comment on the differences of the factor structures of this scale between patient and non-patient populations.

Response: We appreciate this comment however our approach in the discussion section was to limit it to patient populations. We will take this comment in account for future reference.

**Comment #4:** Reference 17 Chena should read Chen. Reference 19 Kanga should read Kanda.

Response: We apologize for the typos and have corrected both errors in the revised manuscript.