Reviewer's report

Title: Epidemiologic heterogeneity of common mood and anxiety disorders over the lifecourse in the general population: a systematic review

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Reviewer: Pablo Mora

Reviewer's report:

The article “Epidemiologic heterogeneity of common mood and anxiety disorders over the lifecourse in the general population: A systematic review” addresses a very relevant topic for both health researchers and practitioners. The underlying ideas and the findings presented have the potential to add to the existent literature. To do so the authors need to address several issues in order to strengthen this article.

Major Compulsory Revisions

1. In the Introduction section the basic position of this article that symptoms of mood disorders are heterogeneous needs further elaboration. A discussion of the theoretical arguments that support a componential or heterogeneous view would help the reader understand the context and the rationale underlying this work. Special emphasis should be given to the conceptualization of heterogeneity (e.g., are the authors referring to types of symptoms, severity of symptoms or both?). Additionally, I would encourage the authors to contrast their view with arguments that mood disorders are homogeneous. The issue here is to provide a clear and stronger rationale as to why conceptualizing moods as heterogeneous factors may help increase the understanding of the phenomena (from a diagnostic perspective heterogeneity may be irrelevant).

2. The results section needs some re-organization to increase the paper’s clarity. For example, headings could be included to differentiate cross-sectional findings, for example, studies that revealed heterogeneity in terms of the quality of symptoms (e.g., types such as cognitive, affective, or physical) versus the quantity (e.g., severity). In addition, a summary paragraph (and ideally a Table) indicating what is known with respect to the different disorders would help the reader make better sense of the results (e.g., number of studies that found cognitive symptoms, or high vs. low prevalence of symptoms, etc.). This is critical as the implications might be different depending on the type of findings. Something similar should be done for the longitudinal findings. Many studies use total scores from depression scales; thus, the heterogeneity observed is related to symptom intensity alone.

3. The authors mentioned in the methods section that they did not include studies that used clinical populations. It is unclear here whether they refer to studies with participants who show clinical levels of mood disorders, whether they refer to studies with participants suffering from health problems (e.g., diabetes), or both.
A sentence needs to be added to clarify this point.

4. It would be helpful if the authors added to Table 1 the type of scale or instrument used to assess the disorder (e.g., BDI, CES-D, HADS, etc).

Discretionary Revisions

1. I wonder why the authors decided to include such a diverse array of disorders instead of focusing on depression alone. Discussing findings pertaining to depression would provide several strengths. First, there is important theoretical work (e.g., Teasdale’s research) on which to base the argument for heterogeneity of symptoms. Second, there is more agreement with respect to the clusters of symptoms related to depression (e.g., cognitive, depressed affect, and anhedonia) which may or may not be reflective of the other disorders included in the review. Third, most of the research conducted and reviewed in this article involves depression, which allows for the examination of trends. The offset of taking this narrower view would be an increase in both the appeal and the impact of this review.

2. Related to point 3 above, if the authors are not excluding studies with participants who have physical health problems they may want to add to their review a study by Contrada et al in Psychosomatic Medicine that examined the trajectory of different types of depressive symptoms among cardiac patients.

**Level of interest:** An article of importance in its field

**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