Reviewer's report

Title: Development of mental health first aid guidelines for panic attacks: a Delphi study

Version: 2 Date: 31 March 2009

Reviewer: Derrick Silove

Reviewer's report:

This study follows in a line of very impressive and practical research by this team focused on developing first aid guidelines for a range of psychological problems. They acknowledge that the small number of "consumers" and the absence of carers represents a serious problem: it does! It would be very helpful to the reader to know why carers would not participate since it is not intuitively evident. The problem is that carers would be precisely the group who could give the most informed, hands-on information of value. I do think the authors need to acknowledge that the absence of input from that group has to make the present study at best, very preliminary and that a follow-up study in which carers are included would be vital.

I find the dissonance between professionals and consumers about breathing control techniques fascinating and baffling! In particular, it is surprising indeed that the professionals did not shift ground in spite of the views of those who experienced the problem! What does this mean in relation to professionals listening to those who actually suffer? In parenthesis, I also wondered about the disproportionate representation of academics overall (as a member of this group, I feel able to raise this matter as a potential concern!). Academics notoriously work in highly specialized settings, sometimes rather distant from the context in which front-line first aid would be most offered.

Major Compulsory Revisions

Some of the key questions that came to mind are: who are these guidelines directed towards: carers, strangers, or dedicated first aid "helpers". It would be good if the authors clarified this issue. For example, I would be more confident that someone trained in first-aid with an appropriate basis of knowledge in mental health could tell the difference between a panic attack and some other acute condition. It is clear that this question was debated amongst the Delphi Groups - what if the first aider is wrong in the "diagnosis" and the person is having some other health-related problem which could be serious if not attended to. It appears that the authors dealt with this by insisting that the person having the panic attack has had one before and knows what it is. But this still begs the question: what does a first aider do if they come across someone having an episode for the first time. Some further clarification of this would be useful.

The greatest need would be for those who are having a panic attack while alone in a public place. It is hard to see how practical these first aid guidelines would be
in that setting unless, fortuitously, a passer-by has recently been exposed to the source of this information. (Such encounters would be rare for any one “first aider” making it doubtful that their “expertize” would be maintained unless, again fortuitously, they had read the guidelines recently or repeatedly.

In the end, is this not a problem that is most effectively dealt with within a self-help and carer framework in relation to those in whom panic attacks occur repeatedly.

Minor Essential Revisions:

The section on risk factors to panic and agoraphobia could be improved - as it stands, it is a bit confusing. Rather than presenting one sentence for the findings of each study, present some summary statements only.

Paragraph 2 on page 4 could do with greater qualification. As yet, we have no data to show that intervention by a member of the public, a friend, etc, makes any difference. It is reasonable to speculate tentatively that it may!

**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