Author's response to reviews

Title: Mobile phone use and stress, sleep disturbances, and symptoms of depression among young adults - a prospective cohort study

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Author's response to reviews: see over
Dear Editors of BMC Public Health,

Please find a second revision of the manuscript: *Mobile phone use and stress, sleep disturbances, and symptoms of depression among young adults – a prospective cohort study* submitted for publication in BMC Public Health.

We are very thankful for the constructive comments from the Associate Editor and Referees! We have carefully considered and revised the manuscript according to the comments and suggestions, and think the manuscript has improved. The revisions are presented point-by-point below, and can also be seen with “tracked changes” in the documents. We hope we have satisfactorily addressed the issues and that the manuscript now is acceptable for publication. All authors have read and approved the final manuscript.

Kind regards,

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**Referee 1:**
There are only some minor comments. The authors talk about possible residual confounding, selection bias and that the results might not be generalisable to the general public. They nevertheless formulate public health prevention strategies (in the conclusions and the abstract), which sounds like a contradiction to me.

We have added “… among the young adults” to the conclusions. We agree that suggesting prevention strategies … helping “individuals” was a bit too general and have accordingly also changed “individuals” to “young adults”. While considering the shortcomings suggested in Methodological considerations, we still believe that we have results that can support the conclusion suggesting possible public health prevention strategies focusing on attitudes about accessibility.

-The EEG example could be taken out, because it makes readers wonder about the biophysical effect, even if the manuscript now clearly states that this is about psychosocial “exposure”.

The example and reference [39] on page 18 is now taken out.

-Move the ethics approval to the end of the methods section. The ethics approval is now moved to the end of the methods section.

**Referee 2:**
No comments or suggestions.

**Associate Editor Comments:**
Major comments:
1. Discussion is too much repetition of Results. Please try to shorten.

We have shortened the first two paragraphs of the discussion (from 684 to 617 words).
2. There are really too many tables: try to describe Table 2 or Table 3 or both in the text only.

   Table 2 has been deleted and is now described in text only in Methods: Mental health outcome variables. The succeeding tables have been re-numbered accordingly. Since we find it important to describe the outcome variables in detail, consequently, the text section is now longer.

Minor comments
1. Avoid reporting on results in the Conclusions of the Abstract.
   We have shortened the Conclusions of the Abstract, by reducing the results reported.

2. Page 4, lines 4-5: change into: ".... including the possibility of a decreasing stigma about mental illness"?
   The sentence has been changed according to the suggestion.

3. Page 9, 10 and possibly elsewhere: explain "response set".
   "Response set" has been changed to "response category" wherever it appears.

4. More clearly indicate everywhere whether the 1 or 2 item depression outcome is used and reported on (and why).
   We found this to be unclear in two places of the main manuscript (in the first and third sentence of the section Cross-sectional associations… p 13), which has now been corrected by adding "(two items)" and "(one and two items)" respectively. With "all mental health outcomes", all four outcomes (stress, sleep disturbances, symptoms of depression (one item), and symptoms of depression (two items)) are intended. We hope this is clear. However, we have not specified the number of items in the Abstract, since detailed description should not be necessary there.

5. Restructure the second paragraph of the Discussion: it discusses several issues. Can this be clarified by using more than one paragraph?
   We have restructured the paragraph somewhat and divided it into more paragraphs.

6. Same comment holds for the first paragraph of Limitations.
   The paragraph has been restructured somewhat and divided into more paragraphs.

7. Page 20, last sentence before "Conclusions": change into: ".... as a "problem" could become a more general(ised) problem, and ........"?
   The sentence has been changed to “.... as a “problem” might indicate a more general problem, and could serve as a....”

8. Table 1: overuse categories are confusing (e.g. percentages do not sum to 100): please clarify.
   We have tried to clarify by adding an empty row under the two overuse items (now specifically entered as item 1 and 2) and then describe the categorization (Low-medium-high) by using the wordings No item – One item – Both items. We hope it is clear now.

   Apart from above mentioned changes, we have also clarified in Analysis and in Table 3 (former Table 4) that “Prevalence ratios with a CI not including 1.00 (before round-off)…” Table 4 (former 5) is corrected to “... CI not including 1.00…”