Reviewer's report

Title: Binge Eating, Purging and Non-purging Compensatory Behaviours: Findings from the Norwegian Population-Based, Longitudinal Study

Version: 2 Date: 9 November 2011

Reviewer: Phillipa Hay

Reviewer's report:

1. Is the question posed by the authors well defined?
The background presents the study rationale well and aims are clear.

2. Are the methods appropriate and well described? Yes
   The study is embedded in a large prospective representative cohort study of participants first assessed 9679 age 12-20 years in 1992. Response rates were 68-92% at first follow-up so only those at first follow-up (~40%, n=3844) continued in the study, response at second follow-up was n=2923, and 2890 competed third follow-up in 2005. ED symptoms were assessed with self-report (BITE) and EAT and other features with validated self-report instruments. Excepting extreme exercise, other variables of interest did not differ between those who were and were not followed-up.

3. Are the data sound?
Yes. The authors should acknowledge the loss to follow-up however, such that by the third follow-up only 30% of the representative sample at time 0 were included.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Yes – data presentation is very clear.

5. Are the discussion and conclusions well balanced and adequately supported by the data?
Most ED behaviours reduced over time excepting use of diet pills which increased in both genders. Purging with binge eating group had highest co-morbidity and other psychopathology. The decline in prevalence of eating disorder features is in accord with Australian data indicating attenuation of EDNOS over time from adolescence (see Patton et al 2003 Eur Child Adolesc Psychiatry). Co-morbid problems however emerged in the Australian study.

The study raises many interesting questions. Is this the natural history of disordered eating in adolescence? Is disordered eating associated with the onset of other problems? Can those who have persistent symptoms be identified and if so be targeted for early intervention /prevention? This merits some comment.

Minor issues (discretionary revision):
Differences with other studies as the authors note may be explained by the
The definition of binge eating in the present study, which did not include loss of control, i.e. was a broader question about overeating “do you binge on large amounts of food”. However, the findings do accord with some other population based studies (both cluster analytic and diagnostic group studies) indicating people in a binge-purging cluster had poorer outcomes and more psychopathology that those in binge-nonpurging clusters. It may be useful to cite these.

6. Are limitations of the work clearly stated? The authors acknowledge other important limitations.

7. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished? See above.

8. Do the title and abstract accurately convey what has been found? The title could indicate that “Binge-eating, purging and non-purging compensatory behaviours decrease from adolescence to adulthood: a longitudinal community study.”

9. Is the writing acceptable? Yes.

**Level of interest:** An article whose findings are important to those with closely related research interests

**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'