Reviewer's report

Title: Quality of Life Impairment Associated with Body Dissatisfaction in a General Population Sample of Women

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Reviewer: Kelsie T Forbush

Reviewer's report:

Dr. Mond and colleagues report on an original study that aims to explicate quality of life impairment associated with body dissatisfaction. The study is well-powered, nationally representative, and incorporates items from a well-validated measure of body dissatisfaction. The question posed by the authors is well-defined. However, additional information in the Introduction Section clarifying why it is important to explore the quality of life impairment associated with body dissatisfaction (particularly given there is already a literature on this in the eating disorders field) would help strengthen the paper. (In other words, the rationale for the study could be clarified and strengthened.) It would also be useful if the authors could provide more detail regarding the association between actual and perceived health (e.g., what is the correlation between these variables in previous studies?). These methodological revisions fall under the category of minor essential revisions.

The Methods section was detailed and generally straightforward, although it could benefit from additional clarification. First, was the entire EDE-Q administered and only some items analyzed or were only a few items administered? Either way, the authors should explain their choice to include/analyze some body dissatisfaction items and not others (e.g., why were these two items chosen over other body dissatisfaction items?). It would be helpful if the authors could clarify the re-coding of the body dissatisfaction variable. Why was this necessary? In addition, it is unclear why the authors chose not to round to the nearest whole number when re-coding body dissatisfaction (e.g., 0.5 could be recoded to 1, 1.5 could be recoded to 2, etc.). The current recoding scheme seems as though it might contribute to a loss of information (e.g., recoding 0.5 and 1.5 to 1 provides less differentiation). Similarly, the rationale to dichotomize the data is not clear. The authors could have kept the categories and run an ordered probit or ordered logit regression (rather than dichotomizing and running logistic regression). Both the methods and results section would benefit from streamlining. These methodological revisions fall under the category of minor essential revisions.

The data certainly are sound and the manuscript is very well-written. The Discussion was well-balanced and adequately supported by the data. A few discretionary revisions to the Discussion section may, however, improve the impact of the paper: First, for non-Australian readers, it may be useful to clarify the term “codes” on p. 12. Second, the authors posit that personality
characteristics associated with body dissatisfaction may contribute to poor appraisals of health. If the authors have the ability to examine this hypothesis in their data, it would significantly strengthen the manuscript. Finally, the authors acknowledge that the sample is not inclusive of young men. It would be useful if they could comment on if they anticipate a different strength or direction of results in men.

Overall, this was an interesting paper based on a well-powered, nationally representative, sample that contributes to the growing literature on quality of life impairment.

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

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

I declare that I have no competing interests.