Author's response to reviews

Title: Length of stay in asylum centres and mental health in asylum seekers: a retrospective study from Denmark

Authors:

Peter Hallas (hallas@rocketmail.com)
Anne R Hansen (aha@si-folkesundhed.dk)
Mia A Staehr (icg@telia.com)
Ebbe Munk-Andersen (ema@redcross.dk)
Henrik L Jorgensen (hlj@dadlnet.dk)

Version: 2 Date: 8 August 2007

Author's response to reviews: see over
To The Editor
BMC Public Health

Reg.: Manuscript: Length of stay in asylum centres…..

We thank for the review of the manuscript and are now submitting a revised edition. As you are aware the manuscript has previously been revised by Dr. Gunnar Morken, Dr. Nicholas Horton and Dr. Ekblad under a different reference number. Because of a major re-evaluation of the data the manuscript has been submitted again under a new reference number and has been reviewed by Dr. Horton.

We would like to thank Dr. Horton for his ongoing suggestions for improvement of the manuscript. Previous concerns have been substantially addressed and he now has some additional comments to the form and style of presentation:

1. Table 1
Table 1 currently shows the absolute numbers of asylum seekers per interval.

Dr. Horton suggests that table 1 should show rate per 1000 asylum seekers instead.

However, the current style and format of table 1 is the result of comments from the earlier reviews (by Dr. Morken) who requested that the table should show absolute numbers.

The rate per 1000 asylum seekers can still be seen in figure 1.

2 and 3: The regression fit and figure 1
Figure 1 is now shown without the logarithmic scale and with lines connecting the dots as suggested. As can be seen, the relationship between the number of referrals per 1000 asylum seekers, RI, and the duration of the stay (in days), DU, is clearly not linear, particularly for psychiatric disease. The mathematical model best fitting the data was $RI = \beta \ln(DU) + \text{intercept}$ with the total number of asylum seekers in each interval used as weight in a weighted linear regression. The reasons for choosing this model have been clarified in the methods section. The changes suggested to figure 1 by the reviewer were most helpful and have made it more clear why we chose the above model for the data analysis.

4. Figure 3
On the basis of our and others findings we suggest a model of the general relationship between length of stay in asylum centres and morbidity. This model is shown in figure 3. Thus figure 3 is not a direct visualization of the cited results but rather an attempt to put the results in our study into a broader perspective.

The model could be used by other researchers who are studying other populations of asylum seekers. The model also illustrates the how the incidence of referrals for psychiatric illness might be reduced.

In order to clarify this to the reader we have re-written the paragraph in the Discussion section that concerns figure 3.

For the authors
Peter Hallas