Reviewer's report

Title: Why medical students choose psychiatry - a 20 country cross-sectional survey

Version: 2 Date: 30 September 2013

Reviewer: Nyapati Rao

Reviewer's report:

Re-Review: Why medical students choose psychiatry - a 20 country cross-sectional survey

The authors must be congratulated for responding to the reviewer's concerns in such painstaking detail. However, the major structural problems with the survey still remain. The major issues are highlighted as follows:

The issue of the anomalous finding that didactic training led to a decrease in the choice of psychiatry as a specialty has still not been dealt with in a satisfactory manner. The authors stated that this could have been due to a Type I error. However, this rationale raises the possibility that all the significant results in this study could be due to Type I error. Perhaps the authors could report both corrected and uncorrected values and interpret both sets of results. Another option might be to think through what else could be a possible explanation for the observed result. For example, the didactic training received by the residents may be lacking in quality, depth, resources and other factors, perhaps painting an unflattering image of the field.

A related issue is one of lack of correlational analyses between the factors. All the individual factors highlighted in the study stem from a global factor analogous to 'exposure to psychiatry.' Correlational analyses between factors could show that these are indeed separate factors and not different phrasings of the same underlying concept (perhaps a reason for inflation of Type I errors).

The issue of coding a response of 'possible' as 'unlikely' has still not been adequately addressed by the authors. In the reference article cited by the authors in their response, (Feifel et al., 1999) this data was treated as continuous not binary. This perceived error in coding might also be a reason for the anomalous result found for didactic training.

Overall, the Discussion section lacks depth related to cultural, linguistic, religious and other social variables. More specifically, the Discussion section lacks depth regarding the limitations of the survey, non-inclusion of participants from USA or the lack of qualitative information regarding choice of psychiatry. The absence of qualitative data limits the ability to address larger-scale issues such cultural stigma towards mental health and psychiatry, and the ability to draw meaningful conclusions about them, even in the context of the impressive multi-national efforts undertaken by this research. Perhaps, the survey can be presented with
limited scope, but with more accuracy and relevance of its results, as well as integrating current limitations with areas of future research.

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

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