Reviewer's report

Title: Competence and attitudes towards patients with suicidal behaviour: A survey of general practitioners, psychiatrists and internists

Version: 2 Date: 19 March 2014

Reviewer: Ellinor Salander Renberg

Reviewer's report:

Thank you for giving me the opportunity to review this paper dealing with an important research field. Competence and attitudes among physicians are most certainly decisive for the support and treatment given to persons in suicidal crisis. Though interesting, parts of the paper is not fully worked through and some sections are difficult to follow, and there is a need to improve the writing and presentation of the study. Another major concern is the low response rate. Please find my detailed comments and recommendations below.

Major Compulsory Revisions

Abstract:

The aim should be rephrased, … to study different physicians´ attitudes towards suicidal behaviour and their perceived competence to care for suicidal patients.

Background:

Last sentence (before research questions) “… internal medical and psychiatric wards…” should be internal medicine and psychiatry regarding:

Methods:

First Para: Specify the meaning of a “letter of informed consent”. Clarify also the importance of a specific subject heading.

Results:

A basic drop out analysis should be conducted regarding gender and age distribution in sample and in responding group, respectively.

Table 1 is difficult to follow, especially the first section regarding response rate. Response rate among GPs is actually 36% and not 30% as indicated in table where relatively percentage is presented instead.

Exact figures already presented in the table should not be repeated in text.

Table 2. Again, figures already presented in table should not be presented in text. In table 2, n=287, is presented, which is strange and should be deleted.

Attitudes, second para: How can the adjusted model show differences between genders since this was adjusted for?

Self-perceived competence ….: Here or in method section it should be described how different diagnosis are combined in the table.

Last para: The scale and scoring for interest in training should be described. The
next sentences are referring to results from USP which should be presented in a new paragraph. Don’t understand the sentence “The skill level ...”.

Discussion:
In my opinion too long, should be shortened.
Clinical interpretations: the reference to “National institute ..” should be clarified and is perhaps to local. Also the reference in Reference list is strange.
Future research, first sentence: “culture in the wards” – what does that mean? Last sentence difficult to understand.
Conclusions:, second Para: “They” should be replaced with Physicians.

Minor Essential Revisions

Titel:
Suggestion: Perceived competence and attitudes towards patients with suicidal behaviour: A survey among general practitioners, psychiatrists and internists

Abstract:
Too detailed (and with repeated) information and too many figures are presented. Should be shortened.

Background:
End of second para: Start a new paragraph from the the last sentence “Physicians ... “ and combine with the next paragraph.
Second research question: Is this fully investigated and analysed? Only regarding gender there are results presented.

Methods:
Under “Incurable illness”, the original ATTS reference should be added.
Under Statistics, SPPS reference is not in Reference list.

Results:
Self-perceived competence ......, first para: I do not understand the third sentence. Expressions like “same” , “higher” and “similar” are used, without referring to statistical measures. Should be described with other words.

Discussion:
First para, line 8: The two sentences about substance misuse should be placed later in the disc part.
Under competence, line 7: Is it as simple as lack of instruments available for GPs? Should be further discussed. Are there existing reliable instruments that could be recommended? Generally different scales have difficulties in assessing suicide risk
Methodological considerations: The section should be shortened with a more clear focus.

Discretionary Revisions:
Background
First para: Are there really no recent references regarding negative attitudes and rejection towards suicidal patients?
Check language and sentences, some of them are not complete.

Methods
Ethics, this section could be shortened.

Results:
Attitudes, third para: Results difficult to follow, consider a Table instead.
Discussion:
Are the results in total what would be expected (underlying hypotheses)? Highlight new interesting findings!

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

**Quality of written English:** Needs some language corrections before being published

**Statistical review:** Yes, but I do not feel adequately qualified to assess the statistics.

**Declaration of competing interests:**
I declare that I have no competing interests