Reviewer's report

Title: The care of patients with subthreshold depression in primary care: Is it all that bad? A qualitative study on the views of general practitioners and patients

Version: 1 Date: 19 May 2007

Reviewer: Anthony Jorm

Reviewer's report:

General
This is an exploratory qualitative study which might be useful in developing a larger quantitative survey used more representative samples.

-----------------------------------------------------------------------------------------------

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

1. The language needs editing by a native English speaker. The expression is sometimes awkward and occasionally unclear.

2. Some of the limitations of the study are well described in the Discussion. However, there are others: (i) the sample of GPs is from Germany and practice there may not be typical of other countries, e.g. the preference for herbal treatments like St John’s wort; (ii) it would have been useful to have a comparison group of patients with major depression, otherwise it is impossible to know how specific some of the findings are to sub-threshold depression (e.g. patients’ and GPs’ treatment preferences).

3. What does it mean to say the GPs were selected “at random”? What exactly does “doctors cooperating with the Department” mean? This is worth knowing to judge how biased the sample was.

4. Under “Subjects”, it is unclear who the “they” were in “they were given a list”.

5. Given that only 20 out of 24 patients had their data included, it would be more appropriate to give the characteristics of the 20 rather than the 24.

6. I could not understand the point being made in the sentence “Moreover, since most GPs treat these patients with counseling…”. Surely if the GP made a physical diagnosis, they would not have used counseling as a major mode of treatment, so the diagnosis does make a difference.

7. The conclusion that “The result that GPs tend to use therapeutic talk …is opposed to studies…” does not seem justified, given that the present study did not examine MDD patients as a contrast.

8. In Table 1, there are no numbers given in brackets for the reasons under “Not satisfied with diagnostic proceedings (5)”.

-----------------------------------------------------------------------------------------------

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Page numbers would help the reviewer in giving feedback.

-----------------------------------------------------------------------------------------------

Discretionary Revisions (which the author can choose to ignore)

-----------------------------------------------------------------------------------------------

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

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: No, the manuscript does not need to be seen by a statistician.

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