Reviewer's report

Title: Recurrence of suicidal ideation due to treatment with antidepressants in anxiety disorder: a case report

Version: 3 Date: 8 November 2007

Reviewer: Salih Selek

I am familiar with the literature and believe that this case meets one of the 7 criteria for evaluation in the journal: Unreported or unusual side effects or adverse interactions involving medications

Has the case been reported coherently?: Yes
Is the case report authentic?: Yes
Is this case worth reporting?: Yes
Is the case report persuasive?: Yes
Does the case report have explanatory value?: No
Does the case report have diagnostic value?: No
Will the case report make a difference to clinical practice?: Yes

Comments to authors:

General
The suggested revisions were made and the manuscript has been organized well. However there are some minor issues before publication.

Revisions necessary for publication
1. (previous suggestion #1) Please make the suggested replacement "unwanted effect" also in the abstract.
2. (previous suggestion #5) Please cite the DSM IV book, and clarify the abbreviation of DSM. Keep in mind that non-psychiatry professionals may also read this manuscript.
3. (previous suggestion #7) Combination of pharmacotherapy and psychological interventions is a good idea, but I wonder why a Fluoxetine + Fluvoxamine combination (both in therapeutic doses) was started, rather than monotherapy. Please clarify that situation: was a drug added on to other due to unresponsiveness etc?
4. (previous suggestion #17 and 18) Discussion is generally well-organized but I think the original point of the manuscript should be "brightened" more. In addition, explaining why the suicidal thoughts resolved when switching to a pure SNRI from a biological aspect, is welcomed instead of mentioning general hypothesis about suicide.

5. Please correct the typographical errors (such as "teeter") and check English again.

What next?: Accept after minor revisions

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