Author's response to reviews

Title: Social differences associated with the use of psychotropic drugs among men and women aged 65 to 74 years living in the community: the International Mobility in Aging Study (IMIAS)

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Version: 2 Date: 11 June 2015

Author's response to reviews: see over
We thank the Reviewer 1 for his relevant comments. Here are our responses.

**Title:** Social inequalities associated with the use of psychotropic drugs among men and women aged 65 to 74 years living in the community: the international mobility in aging study (IMIAS)

**Version:** 1

**Date:** 12 April 2015

**Reviewer:** Pilar Carrasco-Garrido

**Reviewer's report:**

Discretionary Revision

**Comments to the Author**

1. More detailed description of how sociodemographic independent variables were categorized would be interesting. Line 127-144.

   **Response:** For each independent variable (education, income and occupation), more details have been provided (lines 130-151).

2. An increase in self-medication with analgesic drugs may reflect increasing availability and autonomy of community pharmacists – this may be recommended.

   **Response:** A comment on this point has been included in the discussion (lines 330-333)

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

**Quality of written English:** Acceptable

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

**Declaration of competing interests:**

CONFLICT OF INTEREST: None to declare
Reply: We thank the second reviewer for the excellent consideration given to our paper. We hope our responses are satisfactory.

Reviewer's report

Title: Social inequalities associated with the use of psychotropic drugs among men and women aged 65 to 74 years living in the community: the international mobility in aging study (IMIAS)

Version: 1
Date: 4 May 2015
Reviewer: Helian Oliveira

Reviewer's report:
Dear,
Listed below are some points to help.
Kind regards,
H.

BMC'S POINTS
1. Is the question posed by the authors well defined?
It is a good paper.
2. Are the methods appropriate and well described?
Yes
3. Are the data sound?
Yes
4. Do the figures appear to be genuine, i.e. without evidence of manipulation?
Yes
5. Does the manuscript adhere to the relevant standards for reporting and data deposition?
Yes
6. Are the discussion and conclusions well balanced and adequately supported by the data?
Yes
7. Are limitations of the work clearly stated?
Yes
8. Do the authors clearly acknowledge any work upon which they are building, both published and unpublished?
Yes
9. Do the title and abstract accurately convey what has been found?
Yes
10. Is the writing acceptable?
Yes
MAJOR COMPULSORY REVISIONS
Line 56 – Aren’t there indications to prescribe antidepressants for sleep or anxiety problems? Please, try to explain better.

Reply: We have now amended the sentence to state that, “Inappropriate use has been reported: for example, while antidepressants were being taken by 20% of participants with depressive symptoms, they were also being taken by 5-12% of those without depressive symptoms [2]. This could be related to the multiple indications of these drugs, ranging from depression to sleep disorders and neuropathic pain[3.4].” We have included the above citation in our references. (Line 55-59)

MINOR ESSENTIAL REVISIONS
a. Line 99: There are a better place for this expression “fewer than five persons…” ? Is it results?
Reply: This sentence has been changed and placed in results: Ten people were excluded: one each in Kingston, Saint-Hyacinthe, and Tirana, two in Manizales, and five in Natal (lines 193-195).

b. Line 225-230: Are there references?
Reply: The sentence in question is, “The differences in use between countries might be explained by the accessibility of psychotropic drugs in each country’s healthcare system and by doctors’ training on the therapeutic effects of these drugs for elderly persons” We have added references 23-27 for Albania in the discussion, as well as information on different provisions for over-the-counter availability of antidepressive and anxiolytic medication (lines 258-269).

c. Wrong use:
line 31 – It is necessary to change the expression “psychotropic drugs (anxiolytics…” (suggestion: “psychotropic drugs: anxiolytics…”)
Reply: We have changed the sentence, which now reads as follows: “During home visits, all medication taken by the participants in the previous 15 days was recorded. We then used the Anatomical Therapeutic Chemical classification system to code psychotropic drugs as anxiolytics, sedatives, hypnotics (ASH); antidepressants (ADP); or analgesics, antiepileptics, or antiparkinsonians (AEP) ”. (Line 31-34)

d. Is it important more references after 2012? (2013, 2014 or 2015). The revision stopped when the data were collected in 2012. Are there more references?
Reply: Following your recommendation, more recent references (post-2012) have been added. The following references have been added in the introduction: Noordam (2015), Ambresin (2015), Wastesson (2014), and Paige (2015).

DISCRETIONARY REVISIONS
a. Keywords: “global health”?
Reply: In keywords, “global health” has been replaced by “Latin America, Canada, Albania.”

b. Is possible to build a fluxogram with your results?
Reply: We have added Table 1, which provides a description of users and non-users at each site.

The references (in yellow) suggested by the Reviewer in points c, d, e and f have been taken into account in the text.

c. More Brazilian references:

d. About psychotropics:

e. About antidepressants:

f. About benzodiazepines
   http://www.karger.com/Article/FullText/353599
   (Clinical discussion)
   http://www.ncbi.nlm.nih.gov/pubmed/24271254 (other side)

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

Quality of written English: Acceptable

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.