Reviewer's report

Title: Sleep complaints in adolescent depression: One year naturalistic follow-up study

Version: 2
Date: 5 August 2014

Reviewer: Todd Arnedt

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However, there remain some significant concerns with the manuscript in its current form that require attention. These issues are itemized below:

1. The rationale for the subgrouping of sleep complaints is not convincing and inadequate. Non-restorative sleep should not be categorized as "no/minor sleep complaints" since it could represent, for example, the presence of a medical sleep disorder, such as sleep disordered breathing, which is certainly not a minor sleep complaint. A preferred approach would be to devise a continuous measure of sleep complaints from the K-SADS sleep items scores, which would range from 6-18. This would avoid the need to categorize entirely and would allow the authors to still address the fundamental question of the relationship between baseline sleep complaints and clinical outcome.

2. The authors justified the use of the primary study measures well, but the GAF ratings should include an inter-rater reliability statistic if available. The authors indicate that there was good inter-rater reliability for the mood disorder diagnosis (lines 152-154), but this reliability may be different from the GAF reliability.

3. Lines 269-270: There remain concerns that no information is presented on any sleep-related treatment that may have been received by subjects. It appears that the authors only collected information on depression-related treatments, and thus it remains possible that the steeper trajectory of improvement among adolescents with sleep disturbances at baseline (pending the outcome following analyses with continuous sleep complaints outcome) could be related to joint treatment of the sleep disturbance and depression, which would be consistent with the adult literature. If information is explicitly available on sleep-related treatments, please include.

4. The statement on lines 354-355 that "antidepressant drugs generally tend to ameliorate the sleep impairments in depression..." is not accurate. Antidepressants (mainly fluoxetine) have been shown repeatedly in laboratory sleep studies to objectively disrupt sleep, by reducing slow wave sleep, lengthening REM latency, increasing light stage 1 sleep, and fragmenting sleep overall. Please revise this sentence.

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