Reviewer's report

Title: Preferred intensity exercise for adolescents receiving treatment for depression: A pragmatic randomised controlled trial

Version: 1  Date: 4 June 2015

Reviewer: Markus Duncan

Reviewer's report:

• Major Compulsory Revisions

1) Line 264 describing the participant excluded from analyses: Why was this participant not excluded from participating prior to randomization if they did not meet the cut point for depression? The choice to remove this participant’s data from the control group post-hoc needs to be clarified to reduce risk of bias.

• Minor Essential Revisions

2) Lines 50-51: Change “Preferred intensity exercise in addition to treatment as usual..” to something along the lines of “Preferred intensity exercise combined with treatment as usual../Treatment as usual with an additional pref. intensity exercise program” Currently reads awkwardly/unclear that it is a combined treatment or a list.

3) Line 60: remove “ for this group”

4) Line 61: “Alongside this” awkward/colloquial, suggest using “Additionally”

5) Line 68: Add a comma after “national”

6) Line 116: Explain the slash – was stretching either at the start or end, or is it both?

7) Paragraph at Line 142 about heart rate measurement could be simplified. Use active voice for describing how measures were taken, i.e.: “To measure heart rate, participants placed two fingers on separate panels of the faceplate and held for 5 seconds...The exercise therapist could also visually verify heart rate from the watches.”

8) State in the recruitment process what kind of compensation was offered to study participants, or whether no compensation was offered.

9) Line 174: The acronym (SNOSE) is never used again, suggest removing.

10) Paragraph at Line 196 regarding EuroQol measures has several concerns:

A) Keep the short form of the EQ-5D-5L consistent (hyphens vary slightly between uses.

B) Description of the EQ5D-5L scoring is unclear. Does the scoring algorithm result in a range of possible scores from 1 to -0.59, or is that from your sample. In either case, how can a score be less than 0 if that is considered equivalent to death? Also, in what way is this considered equivalent to death?
C) Line 205-206 describing the relationship to “the 3 level questionnaire” is non sequitur. Why is this relevant? I’m assuming this is the EQ-5D-3L (apparent only after looking up the EQ-5D-5L) – and that the 3L is what was previously shown to be related to depression.

11) Paragraph at Line 337 is not explicitly connected to the discussion. Connect with the subsequent paragraph and/or describe how the present study builds on it.

12) Line 453: Insert “capable OF substantial”

13) Line 493: Heart rate should be reported as a % of maximum heart rate (using age based maximum estimate) or % heart rate reserve, as this allows for better comparison to guidelines for exercise intensity.

14) Line 532: Insert “with respect to INTERPRETTING the post-intervention results”

• Discretionary Revisions

15) Suggest adding a brief description to the introduction about why “preferred intensity” was selected.

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

**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.