Reviewer's report

Title: A systematic review of evidence for fitness-to-drive among people with the mental health conditions of schizophrenia, stress/anxiety disorder, depression, personality disorder and obsessive compulsive disorder.

Version: 0 Date: 13 Apr 2017

Reviewer: Anselm Fuermaier

Reviewer's report:

I appreciate the opportunity to review the manuscript entitled "A systematic review of evidence for fitness-to-drive among people with the mental health conditions of schizophrenia, stress/anxiety disorder, depression, personality disorder and obsessive compulsive disorder."

This systematic review addresses a very timely issue, as driving safety and fitness-to-drive of patients with physical and/or cognitive impairment is of increasing societal relevance. While the majority of research in this field includes patients with neurological disorders, fitness-to-drive of patients with psychiatric conditions is clearly under investigated. I hope the present review sheds more light on this topic and stimulates further research. The present review is well structured, clearly written, and gives valid conclusions. The pressing need for research on this topic is illustrated.

Before publication, I have one essential comment:

I miss a rationale for the inclusion and exclusion criteria the authors chose. The authors state that attention deficit hyperactivity disorder (ADHD) was an exclusion criterion, however, related psychiatric disorders, such as anxiety, depression, or personality disorder, that commonly occur comorbid to ADHD, were included in the review. What was the reason for the discrepancy in treating these conditions? The authors correctly emphasize in their review the major role of impulsive behavior for driving safety, as well as the difficulty in assessing fitness-to-drive in these patients due to fluctuations in performance over time (intra-individual variation). Single one-time assessments typically do bad in predicting driving behavior of people with impulsive traits who show their problem behavior in some, but not all situations. These clinical features are commonly seen in ADHD, and would fit very well in the scope of the present review. I could imagine the authors chose to not include ADHD in their review because several reviews on ADHD and driving have been published recently. However, I think the present review would be strengthened if major findings in the field of driving in ADHD would be discussed in the light of the findings of the disorders included (e.g. Borderline personality disorder).
Moreover, in Table 1, the authors state that articles were disregarded that included "Adults of driving age with dementia or Alzheimer's disease or Attention Deficit Hyperactivity Disorder (ADHD)". I am wondering which age groups the authors refer to (young adults and/or older adults?). Further, I am wondering why Alzheimer's dementia is mentioned in the same line as ADHD, with one being a neurological degenerative disorder and the other one a psychiatric developmental disorder. I assume neurological disorders (such as stroke, TBI, MS, etc.) are not considered for inclusion anyway, why then explicitly mentioning Alzheimer's?

I hope the authors find these comments helpful for revision of their very interesting and well conducted work. I am looking forward to seeing this review published in BMC Psychiatry.

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
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Unable to assess

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Yes

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Not relevant to this manuscript

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