Reviewer’s report

Title: Operationalization of Diagnostic Criteria of DSM-5 Somatic Symptom Disorders

Version: 1 Date: 01 Sep 2017

Reviewer: Edward Shorter

Reviewer's report:

This is a potentially important study: "the first study to operationalize the DSM-5 SSD criteria." But the importance is almost lost in an incomprehensible sea of numbers. No reader will have the time to wade through this forest of abbreviations and numerical findings that clutter the text. The data parts should be entirely rewritten, making the importance of the numbers -- and their interpretation -- clear to the general psychiatric reader. Also, the emphasis in the paper should be shifted from "validating" their questionnaire, the ICAB (interview-cognit-affect-behavior), to the patients themselves: The results show a high level of somatization in the Chinese. Why is this?

The whole diagnosis of "SSD" strikes a number of observers as questionable, and it might be good if the authors could comment on whether the diagnosis itself has been "validated," and say something about the extraordinary departure in DSM-5 from the DSM-IV concept. For orientation, the following might be useful: https://www.psychologytoday.com/blog/side-effects/201302/dsm-5-has-gone-press-containing-major-scientific-gaffe

My verdict is: worth publishing, given a big rewrite.

Line by line:

to p4: Tell us up front what the items in "SSD criterion B" are, as readers won't have this kind of thing memorized.

to p 6: The numerous abbreviations are baffling, eg, lines 2-3. Tell us in plain language how you composed the sample.

p6, line 9: "who denied participation with their reasons" What does this mean?

p6, line 18: "to assess the psychological features"?

p7, bottom half: We need to have all these interview schedules sorted out. A table is needed showing each schedule and what it assesses. If we have all these schedules, why do we need the ICAB?

p8 Here is the ICAB. Discussion of what is being measured needs to be clarified
p10 So "SOM+" patients are three-quarters female? This is interesting, but authors don't return to it.

p11 This section on reliability and validity is incomprehensible. Tell us in plain language how you assess "validity." Normally, an external validator is required, just to show us you're measuring what you say you are. I couldn't de-code why you think your numbers are "valid." Suggestion: put most of these numbers in a table and get them out of the text.

to p14: The rest of the statistical presentation is equally baffling. No reader will have the time to sort all this out. It's the authors' job.

p15: The agreement between DSM-IV and DSM-5 is small. This is important. Walk us through how you discovered this. Don't just wave at a bunch of numbers.

p15: The "mild" patients were better-off economically and in terms of employment. The severe patients, not so much. There is an obvious explanation of this.

p17 Discussion: "This is the first study to operationalize the DSM-5 SSD criteria. . . " This is important. Needs to be emphasized in the introduction.

p17-18 Next finding: Caution needed in interpreting the "disproportionate thought" criteria. This, too, is important. What, in the statistical jumble earlier in the paper, shows us that caution is needed? You have to walk us through this. Your readers are not statistics majors, nor does anyone care that much about all these numbers. This isn't physics we're doing here but highly subjective human behavior.

This whole discussion of findings is hard to follow. What did the authors find out that wasn't known before?

Conclusion: What does it mean that DSM-4 and DSM-5 are so far apart on somatization? Which is the less reliable? This is important. Whether the ICAB is "valid" is less important.

Hope these comments are helpful.

**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?**
If not, please specify which controls are required in your comments to the authors.

Yes
Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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