Reviewer’s report

Title: Polypharmacy in a hospitalized psychiatric population: risk estimation and damage quantification

Version: 0 Date: 01 Nov 2018

Reviewer: Liyew Agenagnew

Reviewer’s report:

Thank you for giving the opportunity to review this manuscript.

The paper presents the finding on Polypharmacy in a hospitalized psychiatric population: risk estimation and damage quantification

Strength of the study

Used many tools

Uses different statistical analysis

Over all comments

There are some typing, punctual errors

More focus was given on antipsychotic medications

No objective was stated in the papers body part

About Ethical issues didn’t say any thing

Introduction

first better to state about definition of poly pharmacy and psychotropic medication rather than simply talking about interaction.

Also explain about risk estimation and damage quantification
In psychiatric clinical practice interactions increases with the number of drugs.- which drugs do you mean psychotropic drugs or others drugs good to state clearly.

Drug-drug how much drugs you mean 2,3….. Interaction a close to 90%
10 and up to 40% of hospitalized patients receive two or more antipsychotics? From the same group? At the same time or at different time not mentioned.

Psyquiatric practice = psychiatric

Good to mention in one or two sentence about commonly observed prescribed psychotropic medications in clinical practice which have high drug-drug interaction.

**DESIGN AND METHODS**

This is a mental disease reference center.

Mental disease good to say mental illness

Reference = referral

Prolonged stay patients = how long they stayed to say prolonged

Section 4, prescribed drugs, was divided in two parts, psychiatric agents how antiparkinsonism drugs classified under psychiatric agents,

All drugs information included minimum and maximum dose

2 antidepressives say antidepressants

general drugs and uncluded = what mean uncluded

Extrapiramidalismo, acatisia, late discinesia = typing error

Photosensibility = to mean photosensitivity

Section 6, drug abuse, registered substance abuse 6 months prior to admission ........ anticholinergics what if the patient take those medications for side effect treatment.

Discinesia was considered extrapyramidalism = typing error

Number of psicodrugs = typing error

The analysis was carried out with de programs

**RESULTS**

Sociodemographic = it lacks sentences
Mayor = major

Why substance consumption except tobacco

one seconday effect=secondary

Olanzapine (33.6%),

Haloperidol (30%) and Risperidone (22.9%).=the percentage you put here and in table is not similar

Other psychotropic medications =you mentioned only about antipsychotic medications good to state about others mood stabilizers……

secondary effects. (Table 2)

psychiatric diagnosis. (Table 3) the descriptive you gave and what I found in the table is quite differ try to see it again

Table 4.=. =put the explanation before the table

The only significant coefficients is the "Amount of psychotropic drugs". To assess multicollinearity we obtain the Variance Inflation Factors (VIF). If the VIF is > 10, it suggest a high degree of multicollinearity (Kutner, Nachtsheim, & Neter, 2004), but >2 has been suggested as a cutoff (Sheather, & Simon, 2009)= not necessarily put this paragraph here rather you can mention the maximum VIF you found in your result.

Amount of psychotropic drugs= please replace the word amount by another word

Amount of diagnosis

it was 5 times more likely to present a secondary effect if receiving 6 or more drugs vs 5 or less (OR 6.24

The discussion is somewhat lacks intensively comparing to other finding especially for the first five paragraphs it seems result not discussion

CONCLUSIONS it is good

No explanation was mentioned for abbreviated words

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.

I am able to assess the statistics

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

Needs some language corrections before being published

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