Author’s response to reviews

Title: Real-Life Assessment of Aripiprazole Monthly (Abilify Maintena) in Schizophrenia: A Canadian Naturalistic Non-Interventional Prospective Cohort Study

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Author’s response to reviews:

PEPP-Montréal,
March 23, 2019

Dr. René Ernst Nielsen, MD, PhD,
Editor in Chief, BMC Psychiatry

Dear Dr Nielsen,

We would like to thank you for your response (15-Mar-2019) and the opportunity to re-submit a revised version of the manuscript “Real-Life Assessment of Aripiprazole Monthly (Abilify Maintena) in Schizophrenia: A Canadian Naturalistic Non-Interventional Prospective Cohort Study”. We would also like to thank the reviewers for their continued careful revision of the manuscript.
We have carried out all the needed changes and indicated their positions in the manuscript (see below). We hope the manuscript is now acceptable for publication in your journal.

Sincerely,

Ashok

Ashok Malla, MBBS; FRCPC
Professor and Canada Research Chair in Early Psychosis and Early Intervention in Youth Mental Health,
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Editor Comments:

Dear authors

Thank you for resubmitting your manuscript to BMC Psychiatry. The reviewers find that the manuscript has been improved significantly after the revisions and only a few minor points needs to be adressed before a possible acceptance for publication.

Best

René Ernst Nielsen
MD, PhD, Associate Professor

BMC Psychiatry operates a policy of open peer review, which means that you will be able to see the names of the reviewers who provided the reports via the online peer review system. We encourage you to also view the reports there, via the action links on the left-hand side of the page, to see the names of the reviewers.
Reviewer reports:

Lone Baandrup (Reviewer 1): The authors have adequately answered all issues raised. I have no further comments.

Pirathiv Kugathasan, MSc, PhD. stud. (Reviewer 2): Dear authors,

The manuscript has improved significantly since the first submission. I believe that the responses to the comments previously raised are acceptable.

Although, some minor comments need to be addressed.

#1

In the conclusion section, Akathisia and weight gain related to AOM are not mentioned, but is stated in the conclusion of the abstract. Please correct the conclusion in the manuscript, so all relevant findings are summarized here.

The sentence “Regarding tolerability, a small proportion of patients (9%) experienced akathisia whereas 26% gained clinically significant weight.” has been added under the indicated section at the end of page 15, paragraph 2 lines 6, 7 & 8.

#2

The limitations section should be presented before conclusion

Corrected, pages 14 &15.

#3

Limitations: "Most patients receive some other interventions as part of their treatment although there is a large variation in the quantity and quality of the interventions provided." What could be other interventions? And how could this affect the outcome? This needs to be extended.

The following has been added:
“These other interventions are mostly psychosocial treatments such as, cognitive behavioural therapy (CBT), family intervention, case management etc. All of these interventions are known to positively influence outcome by either reducing residual symptoms (in the case of CBT), reduce risk of relapse (for family intervention), greater retention in and higher adherence to treatment and improve general outcomes (early intervention in psychosis)[37].”

Page 14 the last 2 lines and page 15 the first 4 lines.