Reviewer's report

Title: Informal caregivers of clients with neurological conditions: profiles, patterns and risk factors for distress from a Home Care prevalence study

Version: 2 Date: 30 January 2015

Reviewer: richard schulz

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Many of the issues raised by the reviewers have been adequately addressed, but I remain concerned about the definition of “distress” used in this manuscript. Since this is a central focus of this paper I think it important to get it right. As I noted in my previous review, a client's “caregiver was considered to be in distress if one or both of the following was indicated on the assessment: 1) a caregiver is unable to continue in caring activities; 2) the primary caregiver expresses feelings of distress, anger or depression.” It is not clear why criterion 1 above is considered an indicator of distress. The response to this criticism was that the first criterion captures “the caregiving situation in distress”. I'm not sure what this means, but it is not consistent with how most researchers define or measure distress. Distress is typically defined as an aversive negative state in which coping and adaptation processes fail to return the individual to physiological and/or psychological homeostasis. Criterion 1 used in the study does not capture key elements of this definition. It says nothing about negative states, coping, or disruption of homeostasis. The second criterion comes closer. I think the conclusions of the study—risk factors for distress—are potentially misleading based on the methods used to define distress. If the authors want to model distress than they should use the second criterion only.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

none