Reviewer's report

Title: Adding smartphone-based cognitive-behaviour therapy to pharmacotherapy for major depression (FLATT project): study protocol for a randomized controlled trial

Version: 2 Date: 18 April 2015

Reviewer: Gavin Andrews

Reviewer's report:

Discretionary revisions:
1) Gotzsche in Lancet Psychiatry 2014 argued that ADMeds produced two important side effects that were not usually asked about; sexual difficulties and difficulties in discontinuing. FIBSER does not cover either. I recommend that questions on sexual difficulties be included; and that information be reported on the frequency with which subjects were deleted because they could not cease their first ADMed.

2) the power calculation is based on two meta analyses in which the majority of Ss were not on meds. All Ss in the intervention group will be on meds so perhaps the best guide as to power might come from the recent Watts et al paper on the superiority of CBT over treatment as usual. From those data 0.5 ES might still be reasonable, but according to StarD, the power of a second line of treatment, CBT or Meds, was reduced by some 40% in comparison to when the same treatment was used as the first line of treatment, and this would further erode the power of this study. To be safe I think that I would work on CBT adding less that 0.5SD to the benefit of meds.

Level of interest: An article of outstanding merit and interest in its field

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare I have no competing interests