

ANSWERING REVIEWERS



Dear Editor,

Please find enclosed the edited manuscript in word format (file name: 13375-Review.doc).

Title: Treating comorbid anxiety and depression: Psychosocial and pharmacological approaches

Author: Jeremy Coplan, Cindy Aaronson, Venkatesh Panthangi, Younsuk Kim

Name of Journal: *World Journal of Psychiatry*

ESPS Manuscript NO: 13375

The manuscript has been improved according to the suggestions of reviewers:

1 Format has been updated.

2 Revision has been made according to the suggestions of the reviewer:

Reviewer I

The manuscript is clearly written, easy to understand, comprehensive review of the literature. The text is clearly structured. The manuscript meets the standards for a scientific communication. Minor comments:

(1) Please use only generic names of drugs.

We now follow this recommendation throughout the manuscript.

(2) The Figure is not really contributive.

We have removed the figure as recommended.

(3) It can be more useful if you propose one or two tables to summarize the key-points of the theoretical models of psychosocial approaches.

We have added a table with the key results for each of the theoretical models of psychosocial approaches.

(4) I would recommend the authors to focus on unipolar depression and to avoid bipolar depression in order to avoid confusion for the readers.

We feel it is imperative to address anxiety disorders in the context of comorbid bipolar disorder because of the very high rates of comorbidity. For instance, of the first 500 participants in the Systematic Treatment Enhancement Program for Bipolar Disorder (STEP-BD), over half had lifetime anxiety disorders. Text and references are now provided in page 15.

Reviewer II

(1) This is a useful article encompassing a lot of material about complex clinical scenarios. The authors mostly give good clinical suggestions but tend to gloss over the nuances of the literature and more often than not cite just a few supporting articles rather than providing a balanced appraisal of what is are complex matters. For example, in the section on psychological models, results of single studies are

provided without comment about other studies or critique thereof. I would also like to see a weighing of the plusses and minuses of the different approaches.

The single articles provided for each of the models were described just to support the efficacy of the treatment and were not intended to be a comprehensive review of all studies. We did add several more clinical trials or meta-analyses to demonstrate the response rates where possible as well as including comparisons of treatments head-to-head. We also included one study that attempted to compare two modalities' mechanisms/processes: cognitive restructuring versus cognitive diffusion. Our hope was to give the reader a balanced view of the treatment options and an understanding of the differences and/or similarities of the modalities.

(2) In other areas there are rather sweeping statements such as (pg 13) 'sexual side effects and weight gain, both of which may occur in the majority of patients': really??

We have qualified the rather "sweeping statements" stated above, and have provided systematic data from the literature as to the rates of these side effects (page 17). Although evidence from certain studies do indeed suggest sexual side effects at rates of over 50% associated with the use of SSRIs, the case for weight gain associated with long-term SSRI use is less clear, although paroxetine, but not other SSRIs, has specifically been implicated in one meta-analysis study.

(3) The section on antidepressant use in bipolar is particularly contentious. This salient critique has been tackled in detail in the second half of page 24.

3 References and typesetting were corrected.

Thank you again for publishing our manuscript in the *World Journal of Psychiatry*.