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ESPS Peer-review Report

Name of Journal: World Journal of Psychiatry

ESPS Manuscript NO: 7199

Title: The impact of living with bipolar patients: making sense of caregivers' burden

Reviewer code: 02445242

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-11-09 21:28

Date reviewed: 2013-11-18 06:45

| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|--|--|-------------------------------------|--|
| <input type="checkbox"/> Grade A (Excellent) | <input type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input type="checkbox"/> Accept |
| <input type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

GENERAL COMMENTS (1) The importance of the research and the significance of the research contents This is a timely and significant review highlighting an important area of research. (2) The novelty and innovation of the research Very few reviews of caregiver burden in bipolar disorder are available, so this paper is a fairly new one. (3) Presentation and readability of the manuscript The results could be better organized; suggestions have been made. (4) Ethics of the research. No issues.

SPECIFIC COMMENTS Caregiver burden has received far more attention in dementia and schizophrenia than other psychiatric disorders. Therefore, any attempt to review caregiver or family burden in bipolar disorders is welcome. The authors have carried out a comprehensive and detailed review of the area and presented their findings in this context. I have a few suggestions to make: 1. In their search strategy the authors mention that: In order to provide a critical review of BD and quality of life, particularly in offspring of bipolar parents we performed a detailed PubMed, BioMedCentral, ISI Web of Science, PsycINFO, Elsevier Science Direct, Cochrane Library search to identify all papers and book chapters in English during the period between 1963 and November 2013. It is not clear, when the objective was to review caregiver burden in bipolar disorder, why was the search restricted to offspring of parents with bipolar disorder? The search terms used appear to be more appropriate. I would suggest modifying this sentence. 2. It would be better if the authors used the phrase "persons/patients with bipolar disorder" than "bipolar patients." 3. If the aim was to examine objective and subjective burden in primary caregivers of patients with bipolar disorder, then the results could have been grouped under these two main areas: Objective burden - which would include problem behaviour, financial burden and the effect on the family of the patient Subjective burden - Emotional and other consequences of caring for a relative with bipolar disorder. 4. It would



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have been helpful if the terms used such as caregiver, caregiver/family burden, objective and subjective burden etc. were more clearly defined. The original distinction between objective and subjective burden was made by Hoenig & Hamilton (Hoenig J, Hamilton MW. The schizophrenic patient in the community and his effect on the household. *Int J Soc Psychiatry* 1966; 12:165-176.) 5. Some mention should probably be made of the stress-coping paradigm, which is the predominant paradigm for examining burden in all disorders, including bipolar disorder (Szmukler GI, Burgess P, Herrman H. Caring for relatives with serious mental illness: the development of the Experience of Caregiving Inventory. *Soc Psychiatry Psychiatr Epidemiol* 1996; 31: 137 - 48.) Other elements of this model such as appraisals, coping and mediators could be examined separately from burden. 6. The methodological difficulties in conceptualizing and measuring caregiver burden could be mentioned at some point. (Schene AH, Tessler RC, Gamache GM. Caregiving in severe mental illness: conceptualization and measurement. In: Knudsen HC, Thornicroft G, editors. *Mental Health Service Evaluation*. Cambridge, England: Cambridge University Press; 1996. p. 296-316.). 7. Some idea about how the extent and pattern of caregiver burden in bipolar disorder compares with that in other disorders such as schizophrenia, would be helpful in gaining a better perspective on caregiver burden in bipolar disorder. 8. The interventions to reduce burden could be grouped under simple interventions, which can be offered at the level of the clinician (e.g. enquiring about burden, education and support), and the more complex interventions such as family interventions. 9. The authors could add a table listing the studies, which were included for this review and those which were excluded. 10. Positive aspects of caregivi



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| CLASSIFICATION | LANGUAGE EVALUATION | RECOMMENDATION | CONCLUSION |
|---|--|-------------------------------------|--|
| <input type="checkbox"/> Grade A (Excellent) | <input checked="" type="checkbox"/> Grade A: Priority Publishing | Google Search: | <input checked="" type="checkbox"/> Accept |
| <input checked="" type="checkbox"/> Grade B (Very good) | <input type="checkbox"/> Grade B: minor language polishing | <input type="checkbox"/> Existed | <input type="checkbox"/> High priority for publication |
| <input type="checkbox"/> Grade C (Good) | <input type="checkbox"/> Grade C: a great deal of language polishing | <input type="checkbox"/> No records | <input type="checkbox"/> Rejection |
| <input type="checkbox"/> Grade D (Fair) | <input type="checkbox"/> Grade D: rejected | BPG Search: | <input type="checkbox"/> Minor revision |
| <input type="checkbox"/> Grade E (Poor) | | <input type="checkbox"/> Existed | <input type="checkbox"/> Major revision |
| | | <input type="checkbox"/> No records | |

COMMENTS TO AUTHORS

Review: Maurizio Pompili et al. The impact of living with bipolar patients: making sense of caregivers' burden This manuscript deals with a clinically very important issue - a burden experienced by family members caring for bipolar patients. Unfortunately, this topic has been largely neglected in the literature. This text illustrates very well both points: the role this burden plays in the course of illness of the patients, as well as the dearth of solid, quantitative literature on the subject. The aim of the manuscript was to examine objective and subjective burdens in primary caregivers of bipolar patients and to list which symptoms of the patients are considered more burdensome by the caregivers. To provide a critical review of bipolar disorder and quality of life, particularly in offspring of bipolar parents, the authors performed a detailed literature and Library search. They identified important papers and book chapters published in English between 1963 and 2011. They discovered that the highest levels of distress were caused by patient's behavior and by the patient's role dysfunction. Furthermore, the caregiving role compromised other social roles occupied by the caregiver, becoming part of the heavy social cost of bipolar affective disorder. The data the authors gathered suggest that caregiver burden is high and largely neglected in BD. Yet, the family caregivers are central to the wellbeing of patients, but at the same time researchers, policy makers, and formal service providers often take for granted their co-operation and welfare. Clearly, there is a need to better understand caregivers' views and personal perceptions of the stresses and demands arising from caring for someone with BD in order to develop practical appropriate interventions and to improve the training of caregivers. In summary, well written paper, important clinical topic. No points were identified that would require alterations.



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COMMENTS TO AUTHORS

Comments to Authors: This work deals with the burden of the caregivers who take care of bipolar patients. While it is a very important and actual issue, the manuscript requires a thorough revision. Detailed comments: Introduction, first sentence: it is not clear how that special year, 1999 was selected for reporting and why was a more than ten years earlier time point so important. It would be more appropriate reporting data from the previous year or for a longer period. Introduction, second paragraph, fourth sentence states: ‘BD is indeed the sixth cause of disability among all medical conditions’ As this statement is not generally true for all countries in the world, I recommend explicitly indicate the country where this data has come from. Introduction, fifth paragraph, first sentence: there is an extra ‘that’ in the sentence. Methods, subheading: singular is better for ‘identification’. Study period is differently defined in the Abstract and Method section. Please correct it. Quality assessment, first paragraph, last sentence: instead of ‘caregivers of bipolar disorders patients’, caregivers of patients with bipolar disorder, or caregivers of bipolar patients would be better. Caregivers burden section, sixth paragraph, fourth sentence: ‘.-this is not a discussion. .-this is not a discussion. This is a continuation of the review. These statements do not belong to the Discussion section, as well as many statements below’ is not appropriate there. It seems to be a comment from a reviewer. The structure of the review is a bit confused. Certain issues are discussed more than one times in different parts of the manuscript making the text difficult to follow (e.g.: violence towards the caregiver was discussed in ‘Caregivers burden in BD’ section as well as in ‘Caregivers relationship with the patient’ section.). Create a separate chapter for violence may solve this problem. In ‘Caregivers relationship with the patient’ section, fifth paragraph, third sentence can hardly be understood: ‘When ill, the patient became may be irritable.’ Please correct it.



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Discussion, second paragraph: 'non-biological caregivers'. What does it mean? In the same sentence: 'Axis I and anxiety diagnoses'. As I know, anxiety diagnoses also belong to the Axis I group. The discussion part is a continuation of the results section, drawing conclusions from the findings is missing. English style also requires an extensive revision preferably by a native speaker.