

Author's response to reviews

Title: Minor psychiatric disorders among Brazilian ragpickers: a cross-sectional study

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Author's response to reviews:

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Re: 1775177549838519 Resubmission 2: Minor psychiatric disorders among Brazilian ragpickers: a cross-sectional study

Dear Dr. Ozonoff,

Thank you for your continuing efforts to improve our paper. We are responding to the comments of 2 reviewers - Dr. Parker and Dr. Ray.

Dr. Parker believed that the paper required copy editing for language. David Kriebel has carefully re-reviewed the entire text and improved the English.

Dr. Ray's comments, in italics, are listed below. Our responses follow in normal typeface.

1. More attention should be given on signs and symptoms of MPD in Results and Discussion. That aspect has been grossly neglected although the whole article revolves around this. The readers may wonder what these 'four physical and sixteen psycho-emotional disturbances' are? What is the prevalence of individual signs and symptoms? Can't the authors provide this basic information in a manuscript devoted entirely to MPD? The authors didn't even bother to explain why they did not consider my suggestion about a table or figure on prevalence of MPD in general and some important symptoms of MPD in particular.

We now include a Table which includes the 20 questions in the instrument. We have also added more information in the Methods about the validation of the instrument and its use in developing countries for the economical and rapid assessment of mental health. We do not believe that it is useful to present data on the individual items in the instrument. The instrument has been validated as noted in the Methods, and we follow the standard scoring practice. The specific items have not been investigated for their validity, and we believe it is appropriate for us to follow the standard methods and use the scale intact. Perhaps the reviewer's concerns arise from a different perspective on the methods that are useful in a community cross-sectional survey of a basically healthy population. In these situations, we believe that it is appropriate to use a validated survey instrument which yields a score, whose sensitivity and specificity has been measured previously, instead of characterizing the pattern of the various items which go into that score. For this reason, we do not agree with the suggestion to add a table or figure showing "some important symptoms of MPD..." Table 4 does provide the requested "prevalence of MPD in general..."

2. I have serious reservations about the presentation of data. The authors have argued that a table on socioeconomic and demographic data could not be given because it is already available in two of their published papers. It is difficult to find any logic behind this explanation. The authors may be better advised to consider the present manuscript as a self-explanatory, independent paper rather than an appendix of previous two.

We have added a table with summary socio-demographic characteristics of the study population.

3. The authors have argued that since SRQ-20 is a screening, rather than diagnostic, test they have not taken precautions to eliminate bias. The explanation is hardly tenable. There is no indication in the title that the work deals with preliminary screening of MPD. In any case, these points along with physiological and indoor air quality variables, which the authors have not taken into account, should be documented and appropriately discussed under Discussion. The authors have claimed no association between BMI and MPD. This should be substantiated with facts and figures in Results, and discussed under Discussion. In order to minimize the length of the paper, some peripheral issues may be dropped in Discussion.

We do not understand what the reviewer means when he says that we have not taken precautions to eliminate bias. We believe that we have explained clearly how subjects were selected, and that we have discussed potential biases adequately. We did not collect data on sources of heating. The potential relation between MPD and indoor air quality, while potentially an interesting one, is not something which we believe has strong enough prior evidence that its omission indicates a serious potential bias in our study. We have added detail on the results for BMI showing that it is not associated with MPD. As with air quality, we do not feel that we need to discuss BMI further in the Discussion.

Contrary to their claim 'successfully' has not been omitted in second line of Result, and the full form of ANEP is absent in Methods. Result section is incoherent (example 'Fifteen percent'). Under MPD, 'inferior to' may be replaced by 'lower than the'

Successfully has been omitted from the second line of Results. We have added a Table which provides details on the ANEP instrument for measuring socioeconomic status. The entire text has been carefully reviewed by David Kriebel, a native English speaker, and we feel that the writing is clear and correct. We feel that the results section is coherent. We have removed the word inferior.