

Review of: "Reasons for diagnostic delays in Bipolar Disorder: Systematic review and narrative synthesis"

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Potential competing interests: No potential competing interests to declare.

This is a timely article. I enjoyed reading it. The issue of diagnosing bipolar disorder is a difficult one, as indicated in the theme of the article. As such, it is difficult for clinicians to commit to a diagnosis of bipolar illness early in the development of the disease. For a long time, the idea of diagnosing bipolar illness in children was not strongly considered. It appears that the thinking is changing. To this end, this article addresses important issues regarding early diagnosis to prevent future mental health-related difficulties.

It is interesting that the article is not defining the age range of the populations that are being evaluated. There is no presented data addressing the population demographics of the 21 articles included in this review, from which the conclusions are drawn.

It would be very helpful if the authors generated a data table that includes a summary of the information included in the articles; of interest would be the demographics, such as the total number of patients studied across the 21 articles, country/region of origin, age, and sex of the population. In addition, since we currently do not have a gold standard that provides objective diagnosis of BP driven by biological markers, it would be helpful to understand which criteria for diagnosing bipolar illness were used in the reviewed articles. Furthermore, it would be helpful to know the extent of illness (number of diagnoses) and the duration of interventions that were provided to the patients prior to the diagnosis of BP.

There are many different approaches to the treatment of bipolar illness; significant therapeutic interventions are driven by pharmacotherapy, however, behavioral interventions are also significant. It would be important to know whether the therapeutic interventions in the reviewed articles were consistent.

For clarification, the definitions of "records," "articles," and "studies" would be helpful.

Table #2 in the article is very helpful, as well as the discussion addressing the main issues presented.

Specific comments related to the "Themes" presented in Table #2

Misdiagnosis: The authors suggested that DSM 5 criteria for diagnosing patients with bipolar illness provide for potential errors due to necessity of inclusion of manic and hypomanic episodes. Suggestion is made that patients with major depression may also have underlying bipolar illness and are often initially misdiagnosed. More discussion of how the authors propose to address this complex issue would be helpful, particularly since the pharmacological treatments for major depression and bipolar illness are not the same. Authors pointed out the possibility of induction of manic episodes

with antidepressant medications may be significant, how does one avoid that problem. Did the reviewed papers address the issue of genetic vulnerability based on family history?

Health challenges: How universal are these issues? Are these geographically/culturally specific?

Mental health stigma: How universal are these issues? Are these geographically/culturally specific?

Complex Nature of BD: Quantitative data would be helpful. In the included articles what are the percentages of different diagnosis, how consistent is that across the articles? See comments above.

Individual factors: Are the delays in the diagnosis of BP due to misdiagnosis primarily driven by using DSM-5 criteria and/or low sensitivity of the clinicians to manic and hypomanic symptoms? Is the diagnostic lack of sensitivity driven by the mental healthcare providers or by primary care providers or both?