

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.

Although the topic of this systematic review is of importance for clinicians, the review itself is poorly structured, does not follow standardized reporting criteria, and is poorly written with a serious need for review and elaboration on all points made. Please see my individual comments for details.

1. Title - remove narrative synthesis as a narrative synthesis was not performed.
2. Abstract - Background needs to be fleshed out a lot more.
3. Aim should include the words systematic review.
4. Design needs to tell me the reporting guidelines and methodological orientation used in this review.
5. Methods need to include Braun and Clarke's (2006; 2019; 2022) reflexive thematic analysis. Additionally, this method of synthesis needs to be reflected in the text also.
6. How this fits - refrain from using e.g., i.e., or etc. in academic writing.
7. Introduction - common illness should be common mental illnesses.
8. Please refrain from using abbreviations, particularly bipolar disorder [BD], as this makes the document harder to read.
9. The introduction only takes a half page. I would expect a lot more from this as it is a systematic review. There appears to be no critical debates happening in the text, which is also required.
10. Methods - No mention again of PRISMA 2020 and a methodological orientation to the review. This needs to be stated along with a rationale for their use.
11. You mention the start years of searches of different databases. Why was Medline 1964 and others on other dates?
This is important to add context to the searching.
12. Additionally, Medline and Embase are practically the same thing.
13. Please add the date that the review was registered in PROSPERO.
14. Inclusion/exclusion criteria are not specific enough, please revise.
15. Why was grey literature excluded? This is a systematic review, so everything should be transparent, including the rationale for each and every decision made.
16. PRISMA flow diagram should be part of the results and not the methods section.
17. Methods does not incorporate all parts of PRISMA, which is necessary as PRISMA is the standardised reporting guideline.
18. Data synthesis should tell me how you synthesised the quantitative and qualitative studies. What is present is useful for the qualitative but not the quantitative.

19. You tell me that a meta-analysis cannot be done - what is the rationale for this? This needs to be clear for the reader.
20. Results, you mention you have 21 results but the PRISMA flow diagram says 17??
21. There seems to be no quantitative data in the results, despite its inclusion earlier in the review.
22. Where is the reference to the comparative appraisal table?
23. Where are the results of the assessment of quality?
24. Common themes identified should be results of evidence synthesis.
25. Results section needs serious elaboration. What is here is not sufficient, and there is no evidence of critical thinking within the results here.
26. Strengths and limitations - have you considered your own positionality in relation to the original raw data collected and how this might form reviewer bias?
27. Comparisons with existing literature - What is MDD?
28. You have provided no conclusion. This paper needs one.

Overall, although this review and its results are useful for clinicians, the quality of the review and the lack of transparency and inadequate reporting has let down the potential impact this would make. As such, I would suggest that the authors revise this text extensively given my comments and resubmit.