

## Peer Review Report

# Review Report on Prevalence of long-COVID among low-income and marginalized groups: Evidence from Israel

Original Article, Int J Public Health

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### EVALUATION

#### **Q 1** Please summarize the main findings of the study.

It is an interesting paper addressing the problem of Long-Covid risk according to socioeconomic status, based on a large study in Israel.

Several comments are listed in Q2

#### **Q 2** Please highlight the limitations and strengths.

Limitations

The text is difficult to follow in some places

Strengths:

Large sample size, wide scope of information about examined persons.

#### **Q 3** Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

Abstract

1. Methods: In addition to the study period, Information about the place, and persons examined should be provided

Remark: The information about the size of the population should be provided (i.e.2246 individuals)

2. We are informed that "After controlling for demographic and socioeconomic attributes, those who had moderate/severe acute-COVID were 1.3 ( $p<0.05$ ) times more likely to experience a long-term symptom and also reported more (2.2) long-term symptoms than those who have not been infected"

Remark: no information about the results of the multivariable analysis is provided in the results section:

Results:

3. Line 149-153:" Furthermore, those with moderate/severe COVID-19 reported more long-term symptoms than the other two groups: while those with moderate/severe COVID-19 symptoms reported 2.2 long-term symptoms on average, those with mild/minor symptoms and who did not get infected reported 1.3 and 1.4 symptoms, respectively (mild/minor: not significant; not-infected: 153  $p<0.01$ ");

Remark: Not clear; what are the other two groups? By the way, it is highly expected that those with mild/minor symptoms will have fewer symptoms.

4. Line 184-185. "Each of the three examined population groups comprising the Israeli society (,) experience more long-term symptoms if they had moderate/severe COVID-19 disease, relative to uninfected"

Remark: (,) comma is needed.

Discussion:

5. First, the study relies on cross-sectional and self-reported data, which may lead to bias and inaccuracy in estimating the phenomenon under investigation, namely long COVID

Remark:

It is not clear if the presented study is a prospective cohort study or a repeated cross-sectional one.

6. Line 230–231 However, the results suggest that an explanation for these results does not lie in the low vaccine uptake reported above, as we control for vaccination status in our models  
Remark: Again, no information about the results of the multivariable analysis is provided in the results section:

Figure 1

Remark: In the text, there is information that “Even after controlling for demographic and socioeconomic attributes, those who suffered from moderate or severe COVID-19 short-term symptoms were 1.3 times more likely to experience a long-term symptom 148 than those who have not been infected (Not infected=45.6%; Moderate/severe=61.4%;  $p < 0.05$ ;) In the fig.1 description no information about “controlling for demographic and socioeconomic attributes” is provided.

Minor remarks

Line 170; We also observe mild but significantly higher rates. The use of mild (rate) should be avoided

#### PLEASE COMMENT

**Q 4** Is the title appropriate, concise, attractive?

Yes

**Q 5** Are the keywords appropriate?

Yes

**Q 6** Is the English language of sufficient quality?

Maybe improved

**Q 7** Is the quality of the figures and tables satisfactory?

Yes.

**Q 8** Does the reference list cover the relevant literature adequately and in an unbiased manner?

yes

#### QUALITY ASSESSMENT

**Q 9** Originality



**Q 10** Rigor



**Q 11** Significance to the field



**Q 12** Interest to a general audience



**Q 13** Quality of the writing



**Q 14** Overall scientific quality of the study



#### REVISION LEVEL

**Q 15** Please make a recommendation based on your comments:

Minor revisions.

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