

Peer Review Report

Review Report on Trends in deaths attributable to smoking in China, Japan, the United Kingdom, and the United States from 1990 to 2019

Original Article, Int J Public Health

Reviewer: KRZYSZTOF PRZEWOZNIAK

Submitted on: 19 Aug 2022

Article DOI: 10.3389/ijph.2022.1605147

EVALUATION

Q 1 Please summarize the main findings of the study.

The study shows on decline in smoking-attributable mortality in analysed countries and suggests that time changes are associated with changes in smoking prevalence and specific tobacco control policies.

Q 2 Please highlight the limitations and strengths.

Strengths:

1/ The analysis concerns trends in smoking-attributable mortality in countries with over 1.9 billion and around 0.5 billion of smokers.

2/ Despite methodological doubts to GBD analysis, paper's analysis is based on one of the most solid and recent data sources and analyses on mortality from various risk factors, including tobacco smoking.

3/ The analysis is based on relevant, precise and multi-dimensional methods (age-period-cohort model).

Limitations:

1/ The analysis does not take into account country-based and other international datasets and analyses on smoking-attributable mortality in general population such as the work made by Richard Peto's team.

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.

Major comments:

1/ The conclusion that changes in smoking-attributable mortality in analysed countries results from improvement in specific tobacco control policies seems to be pretty exaggerated. There is couple of other factors that could have an impact on these changes, including culturally-derived changes in health knowledge, beliefs and attitudes, improvement in health education and promotion, disease prevention or access and quality of health care service and advances in treatment of smoking-attributable diseases.

Minor comments:

1/ Data presented in the paper mostly refer to smoking-attributable mortality. Paper's title is quite concise but not attractive, therefore I propose to entitle the paper as follows: "Decline in trends of smoking-attributable deaths and mortality in China, Japan, UK and USA between 1990 and 2019"

2/ Proposal to slightly revise paper's keywords into: deaths and mortality; smoking-attributable; trends; China, Japan, UK, USA; age-period-cohort model; decomposition effect.

3/ Proposal to refer in Discussion and add in References the crucial analysis on smoking-attributable mortality that is systematically continued by Richard Peto's team: Richard Peto, Alan D. Lopez, Hongchao Pan, Jillian Boreham and Michael Thun. MORTALITY FROM SMOKING IN DEVELOPED COUNTRIES 1950-2020. Updated September 2015. Oxford University; <https://gas.ctsu.ox.ac.uk/tobacco/>

4/ I propose to move down Table 1 and 2 to Annex section. These tables seem to include basic statistical analyses data that are used in further part of the paper. Then the article will be mostly illustrated by figures that better refer to paper's hypotheses.

PLEASE COMMENT

Q 4 Is the title appropriate, concise, attractive?

Most of data presented in the paper refer to smoking-attributable mortality. Paper's title is quite concise but not attractive, therefore I propose to entitle the paper as follows: "Decline in trends of smoking-attributable deaths and mortality in China, Japan, UK and USA between 1990 and 2019"

Q 5 Are the keywords appropriate?

I propose to a little bit revise keywords into: deaths and mortality; smoking-attributable; trends; China, Japan, UK, USA; age-period-cohort model; decomposition effect.

Q 6 Is the English language of sufficient quality?

Yes, in general English language of the paper has enough sufficient quality for publishing in scientific paper.

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?)

In general, reference list includes relevant literature and was build up in unbiased manner. International comparisons are mostly based on GBD and Doll/Peto analyses. I only proposed to add and use in the manuscript one more but crucial analysis on smoking-attributable mortality that is systematically continued by Richard Peto's team: Richard Peto, Alan D. Lopez, Hongchao Pan, Jillian Boreham and Michael Thun. MORTALITY FROM SMOKING IN DEVELOPED COUNTRIES 1950-2020. Updated September 2015. Oxford University; <https://gas.ctsu.ox.ac.uk/tobacco/>

QUALITY ASSESSMENT

Q 9 ▶ Originality	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q 10 ▶ Rigor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q 11 ▶ Significance to the field	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q 12 ▶ Interest to a general audience	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q 13 ▶ Quality of the writing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Q 14 ▶ Overall scientific quality of the study	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

REVISION LEVEL

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

Minor revisions.