

## Peer Review Report

# Review Report on Effect of smoking on pain, functional disability, anxiety and depression in patients with chronic low back pain

Original Article, Int J Public Health

Reviewer: Hassan H. Dib

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### EVALUATION

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

The authors analyzed the impact of smoking on people who suffered from CLBP versus those who didn't smoke, which indicated that the smoking group had higher pain intensity, degree of dysfunction and fear-avoidance caused by CLBP than the non-smoking group.

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

the sample size is small

The BMI control is normal ( I would prefer they are above the limit)

Including young youth is not important

proving the relationship of smoking on the intensity of pain in the CLBP ( which already has been proven)

#### **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.

After reading "Effect of smoking on pain, functional disability, anxiety and depression in patients with chronic low back pain" I have couple questions would like the authors if they could clarify them.

How the authors recruited the participants? Was it a face to face or through using a media App?

Was it a random selection or convenient sample?

Is it valid to measure patients or participant on low back pain among the young adults? Usually the CLBP occur more in the late 30s beginning 40s of age.

However, in your "inclusion criteria you (1) age 18–65; (2) pain confined to the waist, buttocks and thighs, with or without leg pain; (3) pain intensity at worst 3 or higher on a visual analogue scale" isn't these inclusion criteria contradicting the title of your paper concerning CLBP? Whereas Wrist, Buttocks and thighs are a radiating pain not a localized CLBP. Maybe you should either alter the CLBP to arthralgia pain and Smoking or CLBP or Lumbar pain.

p. 9 Line 181–184 Smoking can increase the frequency of coughing, and coughing increases abdominal pressure, which intensifies the compression and stretch of the intervertebral disc on the nerve root, thereby blocking the venous return of the inflamed nerve root and increasing edema and sensitivity of the nerve to pain. (Please provide reference for this paragraph– please find the proof for this theory if it is not a theory)

p. 9 Line 187 "It can impair fibrinolysis and increase fibrous deposition 187 and scarring, leading to chronic infection and LBP (Please provide reference for this paragraph).

p. 9 Moreover, smoking can reduce vertebral blood 188 flow and affect intervertebral metabolic balance, thereby accelerating the degenerative process and 189 making the spine more vulnerable to mechanical deformation and trauma (this is in Rabbits, but were they able to prove it in humans?)

What is the limitation of the study?

#### PLEASE COMMENT

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

The title is appropriate concise

**Q 5** Are the keywords appropriate?

need better key words

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

yes

**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.