

## Peer Review Report

# Review Report on Retention and predictors of attrition among People Living with HIV on Antiretroviral Therapy in Guinea: A 13-year historical cohort study in nine large-volume sites

Original Article, Int J Public Health

Reviewer: Reviewer 2

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### EVALUATION

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

Thank you very much for the opportunity to review this manuscript. Retention in care (or 'loss to follow up' in care) is an important aspect in the management of HIV and while there already is a substantial body of evidence in the field, more studies in specific environments and populations are needed. The present manuscript provides a substantial body of work but requires significant changes before it can be considered for publication.

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

There are significant limitations of the present study that need to be addressed. I believe that all of these can be addressed by the authors, hence my recommendation of major revisions.

#### **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.

##### Background

The background/introduction section is extremely limited and needs to be expanded significantly. The current state of this section is disappointing. A thorough background section must include a discussion of retention in care more general including its importance as well as an overview of the existing body of evidence. Furthermore, contextual information on the situation in Guinea is required, specifically regarding availability and accessibility of healthcare services for people living with HIV.

##### Materials and Methods; Results

- A justification for the timeframe is required.
- Why were these specific care sites included? This might affect the results of the study and they are no longer representative of PLHIV under care in Guinea
- What is the justification for the sample size?
- Can you provide further information on the quality of record-keeping in healthcare facilities in Guinea? I.e., how many of those lost-to-follow-up are truly lost rather than being under care at a different facility or deceased but not recorded? Are there studies that aimed to understand the quality of record keeping? While this is discussed in the discussion later on, it doesn't really address the issue itself.
- How was the data extracted?

##### Discussion

- Concerning the point made above, without further information regarding the quality of record keeping, it is difficult to impossible to interpret these results as it is unclear how many patients are truly lost to follow-up and how many just went elsewhere for their ART.

- You mention that poor quality of care may be one reason for loss to follow up. Is further information on these services at different sites available? These could be used for further analyses.

#### 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?

Yes, there are some minor grammar issues but these can be resolved quickly and do not distract.

**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?)

No, please see my comment regarding the background section.

#### 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:

Major revisions.