

## Peer Review Report

# Review Report on Barriers and facilitators in access to diabetes, hypertension, and dyslipidemia medicines: A scoping review

Review, Public Health Rev

Reviewer: Neusa Jessen

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### EVALUATION

#### **Q 1** Please summarize the main theme of the review.

In the present scoping review the authors aim to identify barriers and facilitators of access to medicines for hypertension, diabetes and dyslipidaemia, considering different perspectives, namely: the patient, the health provider and the health system.

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

Strengths: the review focuses on globally relevant public health problems and the authors have included an exhaustive list of possible barriers and facilitators to access of medicines, based in a wide range of information sources from several databases.

Limitations: the entire manuscript needs much improvement in terms of content (as specified below) and the English is poor and would benefit a revision by an native English speaker.

#### **Q 3** Please provide your detailed review report to the authors, structured in major and minor comments.

Comments are provided in each section.

#### Abstract

The abstract needs to be revised and much improved, in particular to clarify the findings of the review.

Lines 20, 21: "Barriers and 21 facilitators were identified in countries with different levels of development."

In my opinion this statement is not informative. Please review and clarify. Did the authors mean that barriers and facilitators were found independently of the level of development of the country?

Lines 23, 24: "Providing free medicines, insurance coverage... were among the identified facilitators.."

Where these the most frequently identified facilitators? Buy saying "among the.." the supposed importance of these factors among all other factors observed is reduced..

I suggest referring to the most reported barriers and facilitators according to dimensions analyzed..

Line 27: "Policies must be attuned .."

Could the authors please be more specific in the conclusion? based on the findings of the review..

Line 28: ",other sectors should be.."

I suggest referring to the most reported barriers and facilitators according to dimensions analyzed..

#### Introduction

Please review references in the first paragraph (some are outdated and some not the most adequate)

Line 37: ".., the global contribution.."

To what exactly the authors refer? Please review.. (global contribution of NCDs?)

Line 39: “..as much as 20% more than the population without these conditions..”

I did not understand this sentence, please review and clarify.

Lines 44 to 48: “Hypertension, diabetes, and dyslipidemia also... adherence to control these conditions (13).”  
Please review. Too long sentence and difficult to follow.

Line 49: “9 Therefore, equitable access to essential medicines is crucial to reducing their burden (14).”  
Please reformulate (the list of essential medicines may differ from one country to another and may not cover the necessary medicines for all NCDs.. is this a special list? from where?)

Line 50: “Effective approaches, such as providing medicines at the primary care level, have shown 51 efficacy (2).”

Please reformulate. (Effective approaches such as... (Reference?)... have shown efficacy??)

Lines 55, 56: “Access to medicines is a global concern, defined as...”

Please clarify this definition of access to medicines and the respective reference.. is this from WHO? or a different dimension of access? Is it access to medicines or to health care services?

Lines 58, 59: Please correct (remove the underlined words) – “... access to an appropriate medicines impacts patients’ adherence (11), which is key for successfully treating these types of conditions..”

Lines 64 to 66: “Because these barriers are complex and interconnected, access to medicines should be...”

With this affirmation one can then ask why the authors decided to evaluate the barriers from the three perspectives (patient, health care worker and ahealth system) if access should be tackled from the health system perspective only?

Line 68: “..in medical access for treating hypertension..”

Do the authors mean access to medicines?

Line 75: “...access to medicines is ..”

Access to medicines to treat such conditions..

Line 79: “..of barriers and facilitators in access to medicines for..”

Worldwide? In different world regions or by socioeconomic development?...

Reasons for inequalities in access to medicines probably differ widely between countries with different socioeconomic development status.

## RESULTS

General comments:

The current form of presentation is exhausting and difficult to follow. Subtitles could help the identification of each dimension and simplify understanding of the results..

I would suggest a table to simplify comprehension of the results.

Lines 205 to 207: “The remaining study populations were based on..”

This is not clear for me. Could the authors please review and clarify this paragraph?

Line 211: “Table S3 and Table S3.” – Please correct the repetition

Line 214: “..2% lower.”

Shouldn't be “Low income”?

## DISCUSSION

General comments:

The discussion needs to be improved.

Some comparison (and discussion) to findings from other studies that evaluated access to medicines would be important.

Other aspects should be discussed, such as the importance of the setting where the study was conducted. For example, most of the studies found were conducted in HICs, what are the implications for the results? Is there

information about which studies were from rural vs urban settings? could there be implications (impact of contextual factors)?

Also, concepts such as the interaction between people and health services, patient-centred care, social determinants of health.. could be used to discuss the implications of the results of this review.

The authors decided to evaluate this problem through a holistic view point but they also state that “access to medicines is socially determined and the result of inequalities within countries”. As such, does it make sense to try to find these factors in a global perspective (since they vary from one setting to another)? This holistic approach needs further justification in the discussion. It could be useful to make a comparison between factors observed according to levels of development or socioeconomic classes because (although the diseases considered in this review are important worldwide) the importance of the determinants for access to medicines is not the same in different settings.

A discussion around the frequency of the determinants that were found according to levels of development of the countries or socioeconomic status of participants would benefit the review and make it more useful for those who wish to use it to guide interventions.

More specific:

Line 453: “..affordability emerges as the most....”

Affordability was evaluated according to the setting.. since the authors have information regarding regions and income status of the countries where the studies were conducted, it would be interesting to evaluate if the importance of this dimension is similar in all settings.. this information could be useful for regulators..

Not clear of what the authors meant with this affirmation: “..affordability emerges as the most-represented barrier.”

Line 545: “..barriers, the most reported were...”

Here should be “..the most reported barrier..” (not dimension) correct?

Line 456, 457: “These barriers are determined by the socio-economic and cultural conditions in which people live.”

This affirmation is based in the results from this review? If not, needs a reference please.

Lines 457 to 460: “This finding enables the design of policies to meet the needs of all involved parties..”

Based on the results of this review, which approaches could the authors recommend to overcome these barriers?

For example, interventions should focus the individual or more public policies?..

Also, the word “..enables..” in that section does not seem adequate (shouldn't be: ..indicates that policies should be designed focussing...?)

Line 461: “Regarding gaps, diabetes is the most widely-studied disease.”

Could the authors be more specific when enumerating the gaps please?

Line 480: “.., healthcare providers should tailor access to medicines to ...”

Please review this affirmation and clarify. I did not understand what the authors meant when saying that healthcare providers should tailor access to medicines.. (access, as well stated in the review, have several dimensions..)

## REFERENCES

Please review.

Some references are outdated;

Some references need links and access date..

Figure 2 needs improvement to become more clear.

## PLEASE COMMENT

**Q 4**

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

The reference list needs to be revised. Some references are outdated. Some words in some of the references are in Spanish.

**Q 5** Does this manuscript refer only to published data? (unpublished data is not allowed for Reviews)

Yes.

**Q 6** Does the manuscript cover the issue in an objective and analytical manner

No.

**Q 7** Was a review on the issue published in the past 12 months?

No.

**Q 8** Does the review have international or global implications?

Yes, it has a wide scope and covers important public health problems worldwide. If improved, it can contribute for a holistic and global overview of the theme.

**Q 9** Is the title appropriate, concise, attractive?

Yes

**Q 10** Are the keywords appropriate?

Yes but the word "facilitators" could be included.

**Q 11** Is the English language of sufficient quality?

No.

**Q 12** Is the quality of the figures and tables satisfactory?

No.

#### QUALITY ASSESSMENT

**Q 13** Quality of generalization and summary



**Q 14** Significance to the field



**Q 15** Interest to a general audience



**Q 16** Quality of the writing



REVISION LEVEL

**Q 17** Please take a decision based on your comments:

Major revisions.