

**Review Form 1.7**

Journal Name:	<b>International STD Research &amp; Reviews</b>
Manuscript Number:	<b>Ms_I-SRR_117336</b>
Title of the Manuscript:	<b>ADHERENCE TO ANTIRETROVIRAL THERAPY AMONG PATIENTS RECEIVING TREATMENT AT TAMALE WEST HOSPITAL</b>
Type of the Article	

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**PART 1: Review Comments**

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
<p><b>Compulsory</b> REVISION comments</p> <ol style="list-style-type: none"> <li><b>Is the manuscript important for scientific community?</b> (Please write few sentences on this manuscript)</li> <li><b>Is the title of the article suitable?</b> (If not please suggest an alternative title)</li> <li><b>Is the abstract of the article comprehensive?</b></li> <li><b>Are subsections and structure of the manuscript appropriate?</b></li> <li><b>Do you think the manuscript is scientifically correct?</b></li> <li><b>Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</b></li> </ol> <p><b><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></b></p>	<ol style="list-style-type: none"> <li>The research is important as it highlights how many people, in a group follow their treatment plans pinpointing key factors that affect adherence. This data is valuable for health authorities and decision makers to create tailored strategies to enhance adherence, which plays a role, in managing HIV</li> <li>The articles title is fitting as it concisely expresses the focus and location of the study effectively outlining the topic and extent of the research.</li> <li>The summary, in the abstract gives an overview of the research including details like the background methods used, main findings and potential impacts. It helps readers understand what the study involves and what it has uncovered. Tailoring recommendations in the abstract to suit the intended audience especially if they are decision makers involves enhancing the result section, with explanations of numerical data.</li> <li>The document is nicely laid out with defined sections that are logically arranged to lead the reader through the introduction, methodology, outcomes and analysis. This format helps maintain a transition of information and assists, in presenting the research results.</li> <li>The research paper shows a commitment, to science with methods a clear sample size and thorough statistical analysis. The conclusions made are backed by the data provided confirming the studys credibility, in the field.</li> <li>The citations selected effectively back up the arguments presented in the document blending both classic and recent research works. Yet to bolster the document further integrating the studies could offer a more current perspective and enrich the literature review.</li> </ol>	
<p><b>Minor</b> REVISION comments</p> <ol style="list-style-type: none"> <li><b>Is language/English quality of the article suitable for scholarly communications?</b></li> </ol>	<p>The manuscripts language and English quality seem suited for communication utilizing the right technical and academic terms. Still some minor grammatical adjustments and proofreading for clarity and fluency could improve its readability and professional tone.</p>	
<p><b>Optional/General</b> comments</p>	<p><b>Language Sensitivity in the Manuscript</b></p> <ol style="list-style-type: none"> <li><b>Person-First Language:</b> <ul style="list-style-type: none"> <li><b>Current Usage:</b> The manuscript uses "HIV positive."</li> <li><b>Suggested Revision:</b> Adopt person-first language such as "people living with HIV" instead of "HIV positive." This language shift places the individual before the medical condition, emphasizing their humanity and not defining them by their health status.</li> </ul> </li> <li><b>Avoiding Stigmatizing Terms:</b> <ul style="list-style-type: none"> <li><b>Current Usage:</b> The manuscript might use terms like "infected persons" or "AIDS victims."</li> <li><b>Suggested Revision:</b> Use "people diagnosed with HIV" instead of "infected persons" and avoid using "victims" which can imply helplessness. Terms like "people affected by AIDS" are more neutral and respectful.</li> </ul> </li> <li><b>Describing Health Conditions:</b> <ul style="list-style-type: none"> <li><b>Current Usage:</b> Terms like "suffering from HIV/AIDS."</li> <li><b>Suggested Revision:</b> Replace with "living with HIV/AIDS." The word "suffering" can connote a constant state of pain and diminish the agency of individuals who may be managing their condition effectively.</li> </ul> </li> <li><b>Discussing Transmission:</b> <ul style="list-style-type: none"> <li><b>Current Usage:</b> Phrases like "transmits HIV."</li> <li><b>Suggested Revision:</b> Use "acquires HIV" or "contracts HIV." These terms are more clinical and less likely to carry moral judgment, which is crucial in avoiding the stigmatization of modes of transmission.</li> </ul> </li> </ol>	

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	<ul style="list-style-type: none"> <li>- Visualization: I suggest including demographic tables that show adherence rates broken down by different demographic factors. This way we can better understand which specific groups may need support, in improving their adherence levels. Using aids, like graphs or pie charts to illustrate adherence data across time intervals (weekly, monthly quarterly) can help readers easily grasp the findings.</li> <li>- The methods section would benefit from a more detailed explanation of the multivariate regression models used, including assumptions checked and the rationale for choosing these specific models.</li> <li>- Address any potential biases or limitations in the study design more thoroughly, such as selection bias or the limitations inherent in self-reported adherence data.</li> <li>- Expand the discussion to include a comparison of the study findings with other similar studies conducted in different regions or countries. This could help contextualize the results within the global literature on HIV/AIDS treatment adherence.</li> <li>- Discuss potential policy implications of the study more fully. How could the findings inform local or national policy changes, especially in terms of improving ART adherence support systems?</li> <li>- The manuscript could be improved by shortening some of the denser, technical paragraphs, especially in the introduction and results sections. Breaking these into shorter paragraphs with clear subheadings could improve readability.</li> <li>- Consider adding a few case studies or quotes from participants where possible to illustrate key points and humanize the data, making the study more engaging for readers.</li> </ul> <p><b>This indicates that some minor revisions are needed to improve language clarity include details and expand certain parts of the discussion to incorporate recent studies and contextual comparisons.</b></p>	
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**PART 2:**

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

**Reviewer Details:**

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