

## Review Form 1.7

Journal Name:	<a href="#">International Research Journal of Oncology</a>
Manuscript Number:	Ms_IRJO_117460
Title of the Manuscript:	KNOWLEDGE AND PERCEPTION OF PROSTATE CANCER AMONG MALES IN RURAL COMMUNITIES IN ESAN NORTH EAST LOCAL GOVERNMENT AREA OF EDO STATE
Type of the Article	Original Research Article

### **General guideline for Peer Review process:**

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<https://www.journalirjo.com/index.php/IRJO/editorial-policy> )

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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> <p>1. <b>Is the manuscript important for scientific community?</b> (Please write few sentences on this manuscript)</p> <p>2. <b>Is the title of the article suitable?</b> (If not please suggest an alternative title)</p> <p>3. <b>Is the abstract of the article comprehensive?</b></p> <p>4. <b>Are subsections and structure of the manuscript appropriate?</b></p> <p>5. <b>Do you think the manuscript is scientifically correct?</b></p>	<p>This manuscript addresses a population where little research has been done about the knowledge and perception of prostate cancer. Prostate cancer coverage in Africa is patchy at best and medical care is only available at few select centres with the resources to provide a urology service. Assessing the baseline level of knowledge in rural communities can provide local government and medical services data on targeted intervention to improve awareness and screening for prostate cancer in the future.</p> <p>The title of the article is suitable.</p> <p>The abstract gives a good overview of the paper, however more details would benefit readers when deciding whether the data of the paper is of interested. For example, "59% of participants showed poor knowledge of prostate cancer, with diverse sources of information identified" – what is the diverse sources of information, a few words to describe these would be useful. "23%% showed good perception of vulnerability to prostate cancer." What is good perception here? Again a few descriptive words would suffice to clarify.</p> <p>The subsections and structure of he manuscript are as follows:  1.0 INTRODUCTION  2.0 METHODOLOGY  3.0 RESULT AND DISCUSSION  3.1 SOCIODEMOGRAPHIC CHARACTERSTICS OF THE RESPONDENTS  3.2 ASSESSMENT OF KNOWLEDGE AND AWARENESS OF PROSTATE CANCER  3.3 ASSESSMENT OF PERCEPTION OF VULNERABILITY TO PROSTATE CANCER AND SERIOUSNESS OF THE DISEASE  3.4 ASSESSMENT OF PROSTATE CANCER SCREENING PRACTICES  3.5 ASSESSMENT OF BARRIERS TO SEEKING INFORMATION AND MEDICAL CARE RELATED TO PROSTATE CANCER  4.0 CONCLUSION  LIMITATIONS  CONSENT AND ETHICAL APPROVAL  REFERENCES</p> <p>The only section which has subheadings are in the result and discussion section – thus the numbering system is redundant, especially as there is no contents table for reference. This is a minor point and does not need changing if the editors do not think it is an issue.</p> <p>I am not familiar with the public health services in Africa so I am unable to comment on the public health portions. However, the methodology centres around a questionnaire which is not detailed in the methodology. Is the questionnaire validated? What questions were asked? The authors list general areas where questions were asked but there is not sufficient details into the actual questions themselves. Since this study looks at the knowledge of the participants and their perception and understanding of prostate cancer, the way the questions are written and the language used is very important. If the questionnaire is not validated, why was a validated questionnaire not used?</p> <p>The randomization of the patients is a simple randomization, does it mean numbers were picked from a random number generator and respondent 3, 7, 9 etc. recruited for the questionnaires – how was this actually applied in reality? The authors need to give more</p>	

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<p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p>	<p>details on the randomization and selection of patients as this directly affects any bias. Furthermore, was the questionnaire applied in English only? English as I understand is the official language in Nigeria, but there are over 500 other languages. Even when studies are conducted in English language countries such as the United Kingdom and United States we still encounter many patients who do not use English as their first language and struggle answering questionnaires because of this – was any measures used to mitigate this risk?</p> <p>In terms of applying the questionnaire itself, how many researchers were involved? Was there any internal data looking at whether any particular researcher scored participants higher or lower than the average in face to face interviews.</p> <p>If the participants were given face to face interviews – what are the reasons 4.3% of respondents didn't return the questionnaire?</p> <p>The study demographic is very young, 40.7% are of 31-40 years old. With prostate cancer incidence increasing in correlation with age – this may be a point worth discussing. Again, in the assessment of knowledge and awareness section, is there any breakdown on the knowledge and awareness by age? If the results are balanced for sample size for each age group, does the results change?</p> <p>If there is no difference in the data across age groups – that is also good to know for public health purposes. If there are differences, then targeted education for certain age groups may be useful.</p> <p>The conclusion can discuss in more depth the interventions the results of this study can bring to public health authorities. Specifically reference the results section and discuss how targeted intervention can be made to certain men based on education level and occupation to improve awareness – what have other countries done? Furthermore, how do the results of this study compare to other studies of a similar nature across Africa?</p>	
<p><b>Minor</b> REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p>	<p>Yes, minor copy editing required.</p>	
<p><b>Optional/General</b> comments</p>		

**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)
<p>Are there ethical issues in this manuscript?</p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

**Reviewer Details:**

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