

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form ([see an example](#)) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below. Some articles will have been accepted based in part or entirely on reviews undertaken for other BMJ Group journals. These will be reproduced where possible.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Cross-sectional survey: Smoking among medical, pharmacy, dental and nursing students, University of Health Sciences, Lao PDR
AUTHORS	Sychareun, Vanphanom; Hansana, Visanou; Choumanivong, Molina; Nathavong, Soudavanh; Chaleunvong, Kongmany; Durham, Jo

VERSION 1 - REVIEW

REVIEWER	Megan A. Pumper Clinical Research Associate Seattle Children's Research Institute United States
REVIEW RETURNED	15-May-2013

RESULTS & CONCLUSIONS	<p>Results: When reported statistical significant differences, a few times did not report how/what direction they differed in text... however could refer to tables. Organization by objectives in results could have been helpful so for example attitudes regarding smoking cessation and then waht the authors have now as subheaders, as well as factors associated with smoking and subheaders. Overall, good though.</p> <p>Discussion: Lack of organization in the discussion, author jumps from point to point, not really bringing the end message together. The conclusion does not seem to bring together the results in a useful manner... emphasizing or triangulating the data into claims that are useful would be more helpful in emphasizing your points. It is very broad, for example the statement "provides an opportunity to engage with students in tobacco control"... not really sure if that is the strength or what your results show in the study (at least how you write it up until this point). Same with the further research, the smoking rates, you make a point of saying in the beginning of your discussion, are low so pointing to effectively disseminating no-smoking policies may not be where your results lend its best, however... applying what is working for this specific Laotian university health services to other clinics could be useful? Overall, there was a disconnect in the results, discussion, and conclusion, also a lack of organization by objectives and lack of thorough conversation about the discussion points. Possibly not discussing all the results separately with one sentence of discussion may lend itself to a more succinct and meaningful discussion and conclusion section.</p>
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REVIEWER	Dr. Pranil Man Singh Pradhan MD Resident School of Public Health and Community Medicine B.P. Koirala Institute of Health Sciences, Dharan Nepal
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REVIEW RETURNED	09-Jun-2013
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THE STUDY	<p>1.Data Collection section Page 8: What was done to minimize response bias? For eg: Presence of teachers in the classroom while students write the answers can bias responses.</p> <p>2. How was ever smoker defined? (Page 19 Line 54)</p> <p>3. Page 8, line 33 Type of model used in logistic regression should be clarified.</p> <p>4. Page 4 line 37-40. "Given their attitudes....." Meaning of the sentence not clear. Grammar needs review in multiple places</p>
RESULTS & CONCLUSIONS	<p>Page 7 Line 9: Outcome variables are mentioned as current smoker, ex-smoker and non smoker, but how was over all prevalence of tobacco use defined? (Page 9, line 25)</p> <p>Table 3 mentions Ever Smoker. How was it defined? Needs to be added in the definition of variables if it is one of the main outcome variables.</p> <p>Page 11, line 25 and Table 7: For which form of smoking was multivariate analysis performed? Current or ever? This need to be clarified.</p> <p>The results of the multivariate analysis need to be expressed in terms of odds ratio for each independent variable. If protective effect is seen, results need to be interpreted accordingly.</p> <p>Table 7: Reference category has not been mentioned in the multivariate analysis. What was the basis for division of age into two groups?</p> <p>Sample size missing in the title of the table 4,5,6 and 7</p>
GENERAL COMMENTS	<p>Abstract Page 3 line 11 (Design): Sample size and method to be mentioned.</p> <p>Abstract: Page 3, line 35: " More men smoked than women....." How many times more or what proportion needs to be added.</p>

VERSION 1 – AUTHOR RESPONSE

Reviewer: Dr. Pranil Man Singh Pradhan
MD Resident
School of Public Health and Community Medicine
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Nepal

Thank you for your comments and suggestions which we have addressed as outlined below and which we feel have greatly enhanced the quality of the paper.

1.Data Collection section Page 8: What was done to minimize response bias? For eg: Presence of teachers in the classroom while students write the answers can bias responses.

Answer: Thank you for your comment. We have added:

To reduce the risk of response bias or students feeling pressured to stay, the teachers were asked to leave the classroom and it was emphasized that students were free to leave or not complete the questionnaire without any reprisals. The purpose of the study was explained and students given time

to ask questions.

2. How was ever smoker defined? (Page 19 Line 54)

Answer: Thank you for your comment. Those who had been smokers before, but had stopped smoking at the time of survey were considered ex-smokers (p.7). To clarify we have changed the text on page 7 to read:

defined as ex-smokers /ever smoked

In table 1 on page 19 we have added:

Ex-smoker/Ever smokers Those who had been smokers before, but had stopped smoking at the time of survey were considered ex-smokers

3. Page 8, line 33 Type of model used in logistic regression should be clarified.

Answer: Thank you for your comment. We have clarified under data analysis:

We used the backward stepwise model by excluding the non-significant variables and retaining only significant variables.

4. Page 4 line 37-40. "Given their attitudes....." Meaning of the sentence not clear. Grammar needs review in multiple places

Answer: Thank you for your comment. We have reworded to:

Thus it is suggested that healthcare students be exposed to tobacco control policies and education from the outset of their training.

Page 7 Line 9: Outcome variables are mentioned as current smoker, ex-smoker and non smoker, but how was over all prevalence of tobacco use defined? (Page 9, line 25)

Answer: Thank you for your comment. The overall prevalence of smoking is related to current smoking based on the international classification. So, we have added

The overall prevalence of current smoking among the third-year health profession students in this sample was 5.1% (n missing=13).

Table 3 mentions Ever Smoker. How was it defined? Needs to be added in the definition of variables if it is one of the main outcome variables.

Answer: Thank you for your comment. We have included the definition of ever smokers in the ex smokers in Table 1

Page 11, line 25 and Table 7: For which form of smoking was multivariate analysis performed? Current or ever? This need to be clarified.

Answer: Thank you for your comment. I added in the text and in the table 7. Multivariate analysis was performed in the form of current smoking.

The results of the multivariate analysis need to be expressed in terms of odds ratio for each independent variable. If protective effect is seen, results need to be interpreted accordingly.

Answer: Thank you for your comment.

Table 7: Reference category has not been mentioned in the multivariate analysis. What was the basis for division of age into two groups?

Answer: Thank you for your comment. I added the reference category in the table 7. The reason of classification the age group into 2 groups is based on the age group of youth as the cut of point.

Sample size missing in the title of the table 4,5,6 and 7

Answer: Thank you for your comment. We fixed the text by putting the sample size in each category.

Abstract Page 3 line 11 (Design): Sample size and method to be mentioned.

Answer: Thank you for your comment. We enrolled all 3rd year health professional students of the University of Health Sciences and we did not know the proportion of smoking among health professional students. We have added:

The sample size was calculated to be 482, (the proportion of smoking among health professional students was unknown so we used 50%) with 95% confidence interval and 5% precision.

Abstract: Page 3, line 35: " More men smoked than women....." How many times more or what proportion needs to be added.

Answer: Thank you for your comment. I fixed in the abstract:

Women smoked less than men (OR=.056, 95% CI=.013-.242, p = 0.003).

VERSION 2 – REVIEW

REVIEWER	Dr. Pranil Man Singh Pradhan MD Resident School of Public Health and Community Medicine B.P. Koirala Institute of Health Sciences, Dharan, Nepal
REVIEW RETURNED	18-Jul-2013

GENERAL COMMENTS	There has been improvement in the current draft compared to the previous version of the same. Grammatical errors need to be corrected.
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