

PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Experience of breast cancer patients on traditional treatment and healers' understanding of causes and manifestations of breast cancer in North Shewa zone, Ethiopia: a phenomenological study
AUTHORS	Mekonnen, Alemayehu; Gebeyehu, Belete; Woldearegay, Mesfin

VERSION 1 – REVIEW

REVIEWER	Mwaka, Amos Makerere University, Medicine
REVIEW RETURNED	24-May-2022

GENERAL COMMENTS	<p>Congratulations upon putting up an important manuscript that has potential to add knowledge that improves understanding of traditional health practices with respect to cancer care and control. This understanding can inform interventions to downstage or diagnose breast cancer early stages when treatment can still improve outcomes. I have a few observations to help improve further the manuscript.</p> <p>Abstract Participants: It is not clear how many patients, and how many healers were included. Please bring it out clearly as it is on page 5; lines 102 – 105.</p> <p>Results Line 30: Statement does not bring out a clear sense of what you wish to say or is saying. Please revise. What were the perceptions of the patients about the causes of breast cancer? Perhaps causal attributions inform choice of treatments that work or cure breast cancer!</p> <p>Conclusions: Line 39 – 40: “Due attention ...” is not clear enough! What is the due attention needed? That is the issue – so please state it here.</p> <p>Strengths and limitations Lines 47 – 48 is not informative. Please clearly state the point you wish to make.</p> <p>Background Line 83: “... the experience and survival of women ...” is he “of” supposed to be “and”? Data collection procedure: Please attach the two tools used. Lines 111 – 112 is difficult to understand particularly “... and the resttwo investigators...”</p> <p>Data processing and analysis Line 119: Primary investigator – rather difficult to comprehend this term and its usage here. Perhaps it could be clearly and more conventional to say “... marking were then performed by AGM...”</p> <p>Patient and public involvement Lines 129 – 130 is challenging. Please review language use if that</p>
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	<p>helps.</p> <p>Results Line 156: please revise. Lines 159, 163: whoes is not equal to whose. Please revise though out the manuscript. Presentations of results could be improved. For example; what are listed as subthemes are perhaps thematic areas as per study tools, and which there could be two or more subthemes. For example – subtheme 1: represents a theme i.e. traditional healer’s understanding of causes of breast cancer. Under this there could be subthemes as follows: Subtheme 1: BC is a genetic disorder or BC is hereditary Subtheme 2: BC is caused by infection And then you provide typical quotes to support each subtheme. Please provide at least two quotes under each subtheme. The same rearrangement applies throughout the manuscript results section. Line 181 – 184: please provide the typical quotes to validate this theme/subtheme. Specifically, talk to how they said they gained access to the healing knowledge! Did they all get the knowledge in the same way? Which is that way of knowledge acquisition? Please expand this important theme/subtheme. Subtheme 4: page 9 clearly needs breaking down to its component parts and then providing the necessary quotations for each subtheme. Subtheme five - line 207: What is it about the lived experiences of BC on modern treatment? This needs to come out clearly. And those aspects form the subthemes which could then be supported by typical quotes. The same considerations apply to subtheme six.</p> <p>I will be glad to review the discussions after the results have been organized since the discussions flow directly from the results.</p>
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REVIEWER	Molla, Gebeyaw Ethiopian Public Health Institute, Reproductive health and health system
REVIEW RETURNED	22-Jun-2022

GENERAL COMMENTS	<p>I have gone through the Manuscript ID bmjopen-2022-063726 entitled "Experience of breast cancer patients on traditional treatment and healers’ understanding of causes and clinical manifestations of breast cancer in North Shewa zone, Ethiopia: a phenomenological study" carefully. It is an interesting title, but the manuscript still needs some revisions. There are some concerns which need to be addressed. The comments are given below:</p> <p>Background</p> <ol style="list-style-type: none"> 1. Line 51, mortality among “females” in Ethiopia. Females shall be replaced by “women” 2. Line 68, As documented by <i>various</i> ethnobotanical studies..... “<i>various</i>” indicates more than two studies. So the author needs to add more than two
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	<p>references</p> <ol style="list-style-type: none"> 3. Line 71, <i>disease is the wrath of God and should be treated with the help of spiritually-oriented healers.</i> Needs citation 4. Line 81, there are high rates of <i>breast cancer</i> patients..." <i>breast cancer</i>" is abbreviated as "BC". In Line 85, capacity of <i>BC</i> healers. Please be consistent throughout your document once you used abbreviation. 5. Generally, the background is well-written, but it is shallow, please add some. <p>Results</p> <ol style="list-style-type: none"> 6. In Table 1: "Age " shall be (age in years) <p>Discussion</p> <ol style="list-style-type: none"> 7. Line 253-7, the sentences need revision. 8. Line 260,...from their "ancestors" shall be replace with "families" <p>Conclusion</p> <ol style="list-style-type: none"> 9. Due attention should be given to traditional treatments to better meet the needs of survival of women with breast cancer in Ethiopia. This conclusion shall be changed as it does not go with your findings. <ol style="list-style-type: none"> 10. References - The authors need to carefully cite the references. Although relevant references have been cited but they are not uniform. Generally, et al is given after the 6th author. <p>Thank you</p>
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VERSION 1 – AUTHOR RESPONSE

Reviewer: #1 (Dr. Amos Mwaka, Makerere University)

Congratulations upon putting up an important manuscript that has the potential to add knowledge that improves understanding of traditional health practices with respect to cancer care and control. This understanding can inform interventions to downstage or diagnose breast cancer early stages when treatment can still improve outcomes. I have a few observations to help improve further the manuscript.

The Authors' Response

☞ Thank you for reading the manuscript and providing us with constructive comments so that we will

improve the quality of the manuscript.

Abstract

Participants: It is not clear how many patients, and how many healers were included. Please bring it out clearly as it is on page 5; lines 102 – 105.

The Authors' Response

⊞ The comment is accepted, and we have now revised it accordingly.

Results

Line 30: Statement does not bring out a clear sense of what you wish to say or are saying. Please revise. What were the perceptions of the patients about the causes of breast cancer? Perhaps causal attributions inform the choice of treatments that work or cure breast cancer!

The Authors' Response

⊞ As indicated in the title, this study assessed the healers' understanding of the causes and clinical manifestations of breast cancer. But, the perceptions of the patients about the causes of breast cancer were not covered in this study.

Conclusions

Line 39 – 40: "Due attention ..." is not clear enough! What is the due attention needed? That is the issue – so please state it here.

The Authors' Response

⊞ Thank you for reading our manuscript. We have revised the manuscript to improve the quality of the paper.

Strengths and limitations

Lines 47 – 48 are not informative. Please clearly state the point you wish to make.

The Authors' Response

⊞ Strengths and limitations are now revised.

Background

Line 83 "... the experience and survival of women ..." is he "of" supposed to be "and"?

The Authors' Response

⊞ Yes, this was an editorial mistake that has now been corrected.

Data collection procedure: Please attach the two tools used.

Lines 111 – 112 are difficult to understand particularly "... and the rest two investigators..."

The Authors' Response

⊞ The comment is accepted, we have now revised the statements and paragraphs. The interview guide is also attached.

Data processing and analysis

Line 119: Primary investigator – rather difficult to comprehend this term and its usage here. Perhaps it could be clearly and more conventional to say "... marking was then performed by AGM..."

The Authors' Response

⊞ The comment is accepted, we have now revised the statement.

Patient and public involvement

Lines 129 – 130 is challenging. Please review language use if that helps.

The Authors' Response

⊞ The comments are accepted, and we have now revised the statements.

Results

Line 156: please revise. Lines 159, 163: whoes is not equal to whose. Please revise though out the manuscript. Presentations of results could be improved. For example; what are listed as subthemes are perhaps thematic areas as per study tools, and which there could be two or more subthemes. For example – subtheme 1: represents a theme i.e. traditional healer's understanding of the causes of breast cancer. Under this there could be subthemes as follows:

Subtheme 1: BC is a genetic disorder or BC is hereditary

Subtheme 2: BC is caused by infection. And then you provide typical quotes to support each subtheme. Please provide at least two quotes under each subtheme. The same rearrangement applies throughout the manuscript results section.

The Authors' Response

⌘ Thank you for the interesting comments. Generally, the result section is revised i.e. the themes and subthemes are now revised based on the reviewer's recommendation. Treatment modalities have been categorized into two subthemes i.e. drinking of herbs as a treatment modality and skin application as a treatment modality. However, out of many risks of BC, only eating habits, hereditary and breast infection was mentioned by our participants. And this is clearly stated under the theme of the healers' understanding of BC causes. We believe that the readers of this paper will be able to understand what the healers knew about BC causes so that we decided the cause without subthemes.

Line 181 – 184: Please provide the typical quotes to validate this theme/subtheme. Specifically, talk about how they said they gained access to the healing knowledge! Did they all get the knowledge in the same way? Which is that way of knowledge acquisition? Please expand this important theme/subtheme.

The Authors' Response

⌘ The comment is accepted the healers saying about the source of knowledge is now included. Subtheme 4: page 9 clearly needs breaking down to its component parts and then providing the necessary quotations for each subtheme.

The Authors' Response

⌘ We have revised the manuscript to improve the quality of the paper. Subtheme five: Line 207: What is it about the lived experiences of BC on modern treatment? This needs to come out clearly. And those aspects form the subthemes which could then be supported by typical quotes. The same considerations apply to subtheme six.

The Authors' Response

⌘ The themes are now revised to improve the quality of the paper. I will be glad to review the discussions after the results have been organized since the discussions flow directly from the results.

Reviewer: #2 (Mr Gebeyaw Molla, Ethiopian Public Health Institute)

The authors have tried to assess the major public health concern problem in Ethiopia. Thus I would like to thank them for teaching me this concern. It is an interesting title, but the manuscript still needs some revisions. There are some concerns which need to be addressed. The comments are given below:

Background

1. Line 51, mortality among “females” in Ethiopia. Females shall be replaced by “women”

The Authors' Response

⌘ The comment is accepted, and the word “females” is replaced by “women”

2. Line 68, as documented by various ethnobotanical studies... “Various” indicates more than two studies. So the author needs to add more than two references here.

Authors' Response

⌘ The comment is accepted, and the references are now added

3. Line 71, the disease is the wrath of God and should be treated with the help of spiritually-oriented healers. Needs citation

The Authors' Response

⌘ The comments are accepted the citation is now revised.

4. Line 81, there are high rates of breast cancer patients...” breast cancer” is abbreviated as “BC”. In Line 85, the capacity of BC healers. Please be consistent throughout your document once you used abbreviations. Generally, the background is well-written, but it is shallow, please add some.

The Authors' Response

⌘ Thank you for the comments and the abbreviations and the background is now revised

Results

5. In Table 1: “Age “ shall be (age in years)

The Authors' Response

⌘ The comment is accepted and age in years is now added

Discussion

6. Line 253-7, the sentences need revision.

The Authors' Response

⌘ The comments are accepted, and the paragraph is now revised

7. Line 260,...from their "ancestors" shall be replaced with "families"

The Authors' Response

⌘ The comment is accepted, and the word "ancestors" is replaced by "families"

Conclusion

8. Due attention should be given to traditional treatments to better meet the needs of survival of women with breast cancer in Ethiopia. This conclusion shall be changed as it does not go with your findings.

The Authors' Response

⌘ The comment is accepted, and the conclusion is now revised

9. References - The authors need to carefully cite the references. Although relevant references have been cited, but they are not uniform. Generally, et al is given after the 6th author.

The Authors' Response

⌘ We are glad about the reviewer's constructive comments. The reference lists are now revised

Thank you in advance!!!

VERSION 2 – REVIEW

REVIEWER	Mwaka, Amos Makerere University, Medicine
REVIEW RETURNED	17-Aug-2022

GENERAL COMMENTS	<p>Congratulations upon improving this manuscript. It is getting better. Please pay some attention to the following concerns, which could help further improve the quality of the manuscript and make it suitable for the journal's readership. Review – BMJ Open: August 2022 The strength and limitation section The expression "this is the first study..." can become a slippery slope if adequate literature reviews have not been completed or some other similar study in the process of publication comes out before the current study. So, review literature again and again before keeping this expression. Bullet 2 is not clear – is it a strength or limitation? Please add some explanation to make the point understandable. Bullet 3 is also not clear – and perhaps biased in itself. Please review and present the point clearly.</p> <p>Patent and public involvement These are great additions regarding the roles different stakeholders have contributed in the planning and implementation of the study. But these contributions are not visible and or referred to in the study methods. How these different stakeholders contributed should appear under various subsections in the methods e.g. local leaders helped in recruitment etc.</p> <p>Results Line 142: "They were also ..." what role does the "also" play here? Comparing or like which other?</p>
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	<p>Themes Line 147: Thematic analysis – is appearing for the first time. It needs to appear under data analysis, and properly described there. The number of themes under each category is not clear; where you state that there are 3 themes, you seem to describe four; and where you state there are two themes, you only mention one. Please organize this result summary section.</p> <p>Line 155: Here, the subthemes under each theme need to be delineated and presented together with the typical quotes that validate them. For example, theme one could have the following subthemes – BC is familial/hereditary; BC is caused by infection. The process of identification of subthemes and including typical quotes needs to be conducted throughout the results section. Ethical approval: presented twice: lines starting 132, and starting 311. Please follow Journal’s requirements and present only once.</p>
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VERSION 2 – AUTHOR RESPONSE

Reviewer: #1 (Dr. Amos Mwaka, Makerere University)

Please pay some attention to the following concerns, which could help further improve the quality of the manuscript and make it suitable for the journal's readership.

The strength and limitation section

1. The expression “this is the first study...” can become a slippery slope if adequate literature reviews have not be completed or some other similar study in the process of publication comes out before the current study. So, review literature again and again before keeping this expression.
2. Bullet 2 is not clear – is it a strength or limitation? Please add some explanation to make the point understandable.
3. Bullet 3 is also not clear -perhaps biased in itself. Please review and present the point clearly.

Authors’ Response

☞ The above three comments are accepted, and the strength and limitation section is now revised.

Patent and public involvement

4. These are great additions regarding the roles different stakeholders have contributed in the planning and implementation of the study. But these contributions are not visible and or referred to in the study methods. How these different stakeholders contributed should appear under various subsections in the methods e.g. local leaders helped in recruitment etc.

Authors’ Response

☞ The comments is accepted and “Patent and public involvement” section is now revised.

Results

5. Line 142: “They were also ...” what role does “also” play here? Comparing/like which other?

Authors’ Response

☞ The comment is accepted, and the paragraph is now revised

Themes

6. Line 147: Thematic analysis – is appearing for the first time. It needs to appear under data analysis, and properly described there.

Authors’ Response

☞ The comment is accepted, and thematic analysis is now described in data analysis section.

7. The number of themes under each category is not clear; where you state that there are 3 themes, you seem to describe four; and where you state there are two themes, you only mention one. Please organize this result summary section.

Authors’ Response

☞ The comment is accepted, and the number of themes are corrected and revised.

8. Line 155: the subthemes under each theme need to be delineated and presented together with the typical quotes that validate them. For example, theme one could have the following subthemes - BC is familial/hereditary; BC is caused by infection.

The process of identification of subthemes and including typical quotes needs to be conducted throughout the results section.

Authors' Response

⊖ The comment is accepted, and the subthemes are clearly stated and revised

Ethical approval:

9. Presented twice: lines starting 132, and starting 311. Please follow Journal's requirements and present only once.

Author's Response

– Comment accepted, ethical approval statement at lines starting 132 is deleted.

Thank you in advance!!!

VERSION 3 – REVIEW

REVIEWER	Mwaka, Amos Makerere University, Medicine
REVIEW RETURNED	21-Sep-2022

GENERAL COMMENTS	I congratulate you for the efforts that have greatly improved the quality of your manuscript. This manuscript makes some important additions to the body of knowledge regarding use of traditional and complementary medicines by cancer patients. In particular, the data can inform strategies to improve timelier health seeking for symptoms of breast cancer, so the prognosis improves. Please revise the whole manuscript and ensure the messages are clear. You may also want to tighten the strength and limitations section in the box, especially bullet two so it is clear how it is a limitation.
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VERSION 3 – AUTHOR RESPONSE

Reviewer: 1: Dr. Amos Mwaka, Makerere University

Comments to the Author:

Dear Authors,

I congratulate you for the efforts that have greatly improved the quality of your manuscript. This manuscript makes some important additions to the body of knowledge regarding use of traditional and complementary medicines by cancer patients. In particular, the data can inform strategies to improve timelier health seeking for symptoms of breast cancer, so the prognosis improves.

1. Please revise the whole manuscript and ensure the messages are clear.

Authors' Response

Comment accepted, and the entire manuscript is now being revised to ensure clarity.

2. You may also want to tighten the strength and limitations section in the box, especially bullet two so it is clear how it is a limitation.

Authors' Response

Comment accepted, and the sentence is now revised.