Author’s response to reviews

Title: Knowledge, Attitudes and Practices of grade three primary schoolchildren in relation to schistosomiasis, soil transmitted helminthiasis and malaria in Zimbabwe

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Re: Responses to reviewers’ comments Manuscript ID 2071491509427267)

Knowledge, Attitudes and Practices of grade three primary schoolchildren in relation to schistosomiasis, soil transmitted helminthiasis and malaria in Zimbabwe


We would like to thank you for giving our manuscript an opportunity to be reviewed by experts in the field of our study. We have addressed reviewers’ comments point by point as raised in the hope that our responses will meet your requirements to publish this manuscript in your Journal.

Comments raised by Reviewer 1:

Comment 1

The reviewer showed that the article was well written but felt that our research was focused on an area that has been extensively investigated and thus our ideas are not new.

Response to comment 1

It is our submission that the investigation was conducted to address the public health problems associated with co-infection of individuals with neglected tropical diseases that often overlap with either malaria, TB or HIV/AIDS. Such co-infections are still to be investigated extensively in order to come up with feasible integrated control options in endemic areas. Of late there has been a greater demand to control neglected tropical diseases through integration with the well funded Big three (malaria, HIV or TB) that have received considerable political and financial support. However until now integrated control strategies are still being investigated for their feasibility (Brooker et al 2007, Hotez et al 2006). Thus KAP studies on NTDs and the big three should be considered as complementing to the integrated control strategies currently being advocated. Our study also focused on grade three primary school children who are commonly preferred for community diagnosis of helminthiasis. Thus it aimed to demonstrate if there are any knowledge gaps that exist in this particular age group regarding neglected tropical diseases (schistosomiasis and STHs) and malaria so that proper strategies including school based health promotion would be considered for combined control of NTD and malaria using children as change agents. It is
therefore our sincere hope that the study will be considered as an important contribution to the current efforts aimed at integrated control of NTDs and the big three.

Comment 2

Reviewer 1 also suggested that we remove several tables and graphs in order to shorten the report.

Response to comment 2

We have critically looked at our results and removed the following tables: 1, 4, 7, 8 and 9. Please see the tables of results with tracked changes. We have also removed figs.1 and 2 of the graphs presented earlier on.

Comment 3

Reviewer number 1 also indicated that the text needs to be reduced especially the discussion.

Response to comment 3

We have reduced our text. Please see tracked changes in the discussion section.

Comments raised by Reviewer 2

The reviewer commented this KAP study as an interesting article that addresses health problems due to malaria (one among the big three), and the neglected diseases (schistosomiasis and STHs). However he also sighted some comments that have to be addressed by us in improving the article.

Comments on the Introduction section

Comment 1 for reviewer 2

The reviewer requested that the outcomes should clearly describe in the methodology section. He also suggested that a distinction be made between practices and experience, awareness and experience.

Response to comment 1 of reviewer 2.

The comment has been addressed in the text, methodology section please see the tracked changes under Knowledge and practices.
Comment 2
The reviewer requested that the statement: This is equivalent to 4 – 10 million days per year” in paragraph 1 of introduction be checked and rephrased for clarity.

Response
The statement has been removed for clarity.

Comment 3
The reviewer requests that the reference Chandiwana et al in paragraph 2 of introduction be sited as Chandiwana and Woolhouse 1991.

Response
The requested changes have been made and highlighted in the text (please see tracked changes).

Comment 4
The reviewer suggests that the statement on pg4, para 1, ln 4: that reads”It also states that for any baseline survey or community diagnosis: A group of primary...” can be rephrased as” It also states that for any baseline survey or community diagnosis, a group of primary...”

Response
The changes have been made according to the reviewer’s suggestion. Please see tracked changes.

Comments on the Methods Section

Comment 5
The reviewer suggested that we use the term grade in all sections of the article instead of using class and grade interchangeably.

Response
The term class has been replaced by grade in all sections as requested.

Comment 6
The reviewer also suggested that the authors expand the description of the study population by including the age range of the participants.

Response
Age range and sex proportions of the study population have been included in the description of the study population section. Please see tracked changes.

Comment 7
The reviewer suggest that we remove the description of the sample size calculated for the main study in this article and only describe the sample size used in this study.

Response
The description of the sample size calculation for the main study has been removed and only the description of the sample size used in this study is shown under sample size with an indication that this was part of the main study. Please see tracked changes.
Comment 9
Reviewer 2 suggested that we indicate causes and risk factors on the list of responses considered correct for schistosomiasis.

Response to comment 9
Corrections have been made according to the reviewer’s suggestions.

Comment for the Results section

Comment 10
The reviewer suggest that we replace the term clustering with nature in paragraph 1 line 11 of page 10.

Response to comment 10
We have replaced clustering with distribution nature. Please see tracked changes.

Comment 11
The reviewer suggest that we clarify on which methods we based parasitological results presented.

Response to comment 11
We have addressed this comment under methodology section for parasitological investigations. Please see tracked changes.

Comment 12
The reviewer could not link results indicate in the text under prevalence of parasites with Table 2 (previously table 3).

Response to comment 12
Results presented in 2 (previously table 3) are stratified by school where as the results presented in the text were obtained from additional analysis after stratifying the study population by site. This has now been explained well in the text which is now re-arranged in a more clearer format. Please see tracked changes under the section on prevalence of parasites.

Comment 13
The reviewer points out that the text wrongly refers to table 3 the results regarding sources of water for drinking and bathing instead of referring to table 4.

Response to comment 13
Results on sources of water are presented in text only since table 4 has been removed according to reviewer 1’s comments. Please see the results section on water sources with tracked changes.
Comment 14
The reviewer also pointed that the statement on Pg 13, under “”, line 2: that reads “Of 172 respondents, 98.4 indicated that they ate food with their hands”. Table 7 does not show the data.

Response to comment 14
This was an additional analysis not shown in table 7. However table 7 has been removed according to recommendations made by reviewer 1.

Comments for the discussion section

Comment 15
The reviewer suggested revision of a statement on Page 19 paragraph 2 that reads:
Chandiwana et al observed that the prevalence and mean intensity of *S. haematobium* varied with age being highest in the 8-10 year age class (67.6%) and 13.1 eggs/10ml respectively

Response to comment 15
The statement has been revised and it now reads: “Chandiwana and Whoolhouse observed that the prevalence and mean intensity of *S. haematobium* were highest in the 8-10 year age group (67.6%) and 13.1 eggs/10ml respectively”

Comment 16
The reviewer suggested that the conclusion in the abstract and discussion be in harmony

Response to comment 16
The conclusion in the abstract has been harmonised with that in the discussion.