Reviewer’s report

Title: Sexually transmitted infections in Saudi Arabia

Version: 1 Date: 5 June 2005

Reviewer: James Bingham

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General
I was interested to read this account of STIs in Saudi Arabia. I have a number of comments:

1. There is only one author; I cannot believe that there are not others in the Ministry of Health, or elsewhere, who must have contributed to to this work, if only in the collation of the epidemiological data. Surely other names should be on the authorship list, or at least acknowledged in the text.
2. You say that reporting of the data is "mandated" by the MoH; I assume it is not compulsory as you mention, elsewhere in the text, that there is a possibility of under-reporting. Apart from laboratories, which clinicians report? It might be useful to say who they are ie infectious disease physicians, primary care physicians, gynaecologists, urologists etc and do you have any idea of the degree of compliance with the mandate.
3. Also, precisely what detail is collected on each case? ie is the patient named, or is there just a case number? I assume the sex of the patient is known and perhaps also, their sexual orientation. I know that, under Islamic law homosexuality is prohibited but, if a patient declared this, would this be reported to the MoH? Is an address given, as epidemiologists will often find it useful to map where most infections are situated in order to try to put in place control measures? You talk about, for example, gonorrhoeae, do you know which orifices are infected eg urethra, cervix, pharynx or rectum?
4. You mention that MoH and Ministry of the Interior officials see the reports; I can understand why MoH officials should have sight of the data, but for what purpose do the Ministry of the Interior officials need to know the incidences? Is it because those infected individuals have to have Islamic law applied to them, as acquisition of an STI might imply extra-marital sexual activity? I suppose that this would imply that the notified cases are named, so it is important to have this clarified for readers. I wonder, also, why the figures are not made public.
5. I was interested to read, in the case definitions section that chancroid is only included as a diagnosis if the organism is grown in the laboratory. Laboratories in most countries have difficulty in culturing H. ducreyi, so it is impressive if, in labs all over the Kingdom of Saudi Arabia, this is achieved. Have you any comment on this?
6. In a wealthy country like Saudi Arabia, I was surprised that trichomoniasis was the second most common STI. It is an easy disease to treat, is most frequently diagnosed in women but in many countries the male sexual partners often are not treated. Do you think that that might be the case here?
7. The whole world is pondering strategies to control the spread of STIs. I was fascinated that, in the Kingdom of Saudi Arabia, the main strategy is the application of Islamic law. Of course, I understand and respect that each country must do as it sees fit within its mores and laws, but I imagine that readers will be interested to learn that this is the sole approach. Most workers in the field agree that attempts should be made at partner notification/contact tracing, but this is not mentioned in the text and I wonder if the author could comment on this in a revised version of this article.
8. While I note the remark that it is practice to "implement the Islamic penalties on those involved in such illegal acts", I think it would be helpful to readers to know exactly what these penalties are, and if they are implemented across the board.
Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

I think that the author should respond to all of these comments, 1-8, before a decision is made on publication.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

You have a reference 8 in the text, but it is not listed in the list of references. Please include that.

Discretionary Revisions (which the author can choose to ignore)

I note that only the years 1995-1999 are included in the report. Is no more up to date information available?

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests.