Reviewer’s report

Title: Prevalence and correlates of medication non-adherence among kidney transplant recipients more than 6 months post-transplant: A cross-sectional study

Version: 1 Date: 24 June 2013

Reviewer: Martin Howell

Reviewer’s report:

Please Refer to attached review for further details.

Major Compulsory Revisions

1. The number of acute rejection episodes differs significantly between the ITAS score groups - however no further assessment in relation to non-adherence.

2. The clinical significance of the ITAS score should be discussed. Much is made in the discussion of the large proportion of patients with some level of non-adherence whereas 85% had a score >9. The authors should consider the clinical significance of this level of non-adherence. The assessment may be that there is no evidence, however this is an important aspect of the evaluation of the results and associated uncertainties.

Minor Essential Revisions

NONE NOTED.

Discretionary Revisions

3. The discussion has been written to place an emphasis on their being a high level of non-adherence by using words such as 'substantial'. However, 85% of the patients had an ITAS score >9. This is not necessarily a helpful approach and it would be better to place an emphasis on the study showing the majority are adherent or have minor deviation and then to discuss the clinical relevance.

4. The basis for assessment of the ITBS scores is the correlation with ITAS and this is reported as an odds ratio. Correlation is to be expected as the ITBS is also a measure of non-adherence given that it is likely that an adherent individual would identify few if any barriers. It might be helpful to tabulate the ITBS scores so that the relative importance of each of the barriers can be seen.

5. In the discussion it is stated that interventions aimed at addressing psychosocial factors are unlikely to have a appreciable impact on non-adherence. In my view given the limitations of this study (as stated by the authors) this statement is not supported. There is a high prevalence of depression in kidney transplant recipients and depression has been associated with poor outcomes as well as non-adherence and there are available interventions for depression that should not be discounted. This is particularly so given that addressing non-adherence is a multi-factorial problem that likely
involves a high level of individual counseling and tailoring of interventions in addition to broader strategies.

**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** Yes, and I have assessed the statistics in my report.

**Declaration of competing interests:**

'I declare that I have no competing interests'