Reviewer’s report

Title: HIV and Hepatitis C virus Test Uptake at Methadone Clinics in Southern China: Missed Opportunities for Expanding Case Detection of Bloodborne Infections

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Reviewer: Eric Nehl

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This research “HIV and Hepatitis C virus Test Uptake at Methadone Clinics in Southern China: Missed Opportunities for Expanding Case Detection of Bloodborne Infections” used a cross-sectional research design including surveillance data and laboratory testing confirmation of HIV and HCV. The aim of this research was to explore individual and clinic-level factors relating to HIV and HCV testing uptake among a sample of 49 methadone clinics in Guangdong Province, Southern China.

The article makes a useful contribution to the literature because testing in China hasn’t been integrated in the past, methadone clinics are relatively new in China and serve patients at high risk for both HIV and HCV, and there is a research need to determine the clinic- and person-level factors associated with uptake. There is much potential in this line of research. However, there are some limitations that diminish enthusiasm for the current paper.

Abstract

1. The abstract is acceptable.

Introduction

2. The introduction is acceptable.

3. The authors state that “Barriers to testing in methadone clinics…. Need to be systematically examined.” However, there are no true barriers assessed in the study. Please change this terminology.

Methods

4. The measures for this study at the individual level need significantly more explanation. It seems as though available data include drug type, injecting behaviors, needle sharing, and detoxification experience. However, the writing in the results, discussion, and tables indicate that only lifetime injecting experience was included (and only as yes/no). There needs to be greater specification of what was measured, how it was coded, and what/why variables were included in the analyses. Additionally, use “ever injected drugs” throughout.

5. The clinic level data is straightforward.
Analysis
6. The descriptive analyses are largely acceptable. The HIV and HCV rates need to be presented.
7. There needs to be further description of how variables were chosen for the final models.
8. The main analyses pertaining to HIV and HCV uptake are acceptable. Please include the results from an initial empty multilevel model so the variance accounted for by the clinic can be assessed. Also, please describe if a sequential approach to evaluating the models was used and the results at each step.
9. Were any cross-level interactions evaluated? Please describe if they were - and provide reasoning/include if they were not.
10. HIV and HCV uptake are evaluated separately throughout the paper. Only a final correlation is presented looking at the two jointly. There needs to be greater attention paid to the integrated outcome at these clinics. The authors should run similar multi-level analyses for a combined outcome as were conducted for each outcome separately.

Limitations
11. The data are from 2008. Please list this as a limitation and describe any policy changes since then.

Discussion
12. Please include and discuss the HIV/HCV rates from these clinics.

Level of interest: An article of importance in its field
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