Reviewer's report

Title: Community awareness of stroke in Accra, Ghana.

Version: Date: 15 December 2013

Reviewer: Kolawole Wahab

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COMMUNITY AWARENESS OF STROKE IN ACCRA, GHANA

MAJOR COMPULSORY REVISIONS

ABSTRACT
1. Background:
   a. The aim of the study should be re-written to read: “The aim of the current study was to evaluate… in Accra, the capital city of Ghana”.
   b. Last line: “and other basic features of the disease” should be deleted.
2. Methods: More details should be provided here.
3. Results:
   a. The statistics are not correct. The results need to be re-written in line with the corrections highlighted in the results section of the manuscript.
   b. The last sentence should be re-constructed to reflect the odd ratios. It is also not clear from this sentence what the authors mean by stroke knowledge because this is not clear in the results section of the manuscript.

METHODS

Sampling and data collection
1. Paragraph 1, last sentence: Why did they restrict the age group to 18-60 years? An explanation needs to be given for selection of this age group.
2. The authors should clearly state the outcome measure in this study. This is because the last sentence of the abstract section and the last sentence of paragraph 3 of results section are conflicting.
3. Data analysis
   a. Paragraphs 2-3: prevalence rates and geometric means: these should be deleted as they were not used in the results and discussion

RESULTS SECTION
1. The statistics need to be re-done completely as all the percentages reported do not really tally.
2. The denominator is 735, yet the percentages obtained in all tables do not really conform to this. For instance in table 1, none of the percentages reported is correct using 735 respondents as the denominator.
3. Paragraph 2: Last sentence: In multiple logistic regression analysis, identification of brain as the organ affected by stroke was significantly associated with age <50 years. However, in the abstract the authors refer to predictors of stroke knowledge from the current study as being age, gender, religion and presence of a stroke risk factor. There is nowhere gender was reported in the results section. The assertion in the abstract thus requires clarification.

4. In paragraph 2 of the results section, Christian religion was identified to be associated with a higher knowledge of stroke risk factors (OR 14.86). However, the large confidence interval of 1.37-161.01 will make one to be careful in interpreting this odd ratio even though it is statistically significant (p=0.03). This should be appropriately highlighted in the discussion section.

5. It is important that tables showing the regression analyses are produced.

DISCUSSION
1. This should be revised in line with the corrections pointed out in the results section.

2. Paragraph 5, line 4 “…….majority of respondents, 62% were not aware of the fact that the disease is a major killer”. Although it has been pointed out earlier that the statistical analysis has to be re-done, kindly correlate the figure in this sentence with the values quoted in table 3.

MINOR ESSENTIAL REVISIONS

INTRODUCTION
1. Paragraph 3, last line: ….. “other basic features of the disease”. What do the authors mean by this? They need to expatiate.

DISCRETIONARY REVISIONS
Nil

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

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests