Reviewer's report

Title: Barriers and enablers to management of tuberculosis treatment in Addis Ababa, Ethiopia: A qualitative study.

Version: 1 Date: 10 June 2007

Reviewer: Alison Grant

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General
This is an interesting paper describing obstacles to completion of TB treatment among patients in Ethiopia. In-depth interviews and focus group discussions were conducted with patients, relatives and health care staff. Similar work has been done before but I think this study highlights some important issues about delivery of TB treatment which are relevant to other settings.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)
None

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
1. page 14-16: have the names of participants been changed? If they have not been changed, I think you should take them out – they are not necessary and participants could potentially be recognised by health care staff reading the paper. If names have been changed this should be made clear – but since they are not necessary I suggest you simply take them out.

Discretionary Revisions (which the author can choose to ignore)
1. I found it quite difficult initially to understand the study design, specifically to understand which groups of individuals were involved in the study. I think it would help the reader if there was a short section early in the methods describing this briefly. The detail of how each group was interviewed could follow this. The newly diagnosed TB cases who were interviewed three times during the course of treatment are in effect a cohort. So the study comprised a cohort of newly diagnosed TB patients, plus a cross-sectional study among patients who interrupted treatment, their relatives and health care staff, plus focus group discussions involving patients currently on treatment.

2. It would be helpful to have a couple of sentences at the beginning of the results describing the demographic details of the different groups of individuals involved in the study – I realise that this information is in table 1 but I think it would help the reader to summarise the key points from this table at this point in the text, and refer to the table.

3. In this type of study the participants do not need to be a representative sample, but, none the less, it would be informative to know how many defaulters the researchers attempted to contact in order to get the eleven who did participate.

4. page 7, paragraph 3: I am not sure what “daily labourer” means – can you explain this?

5. page 9, paragraph 5: what does “poor healing conditions” mean?

6. page 13, first paragraph: when you say “incurable condition” do you mean HIV infection? I suggest you make this clear.

7. Discussion: I suggest you start with the section describing what the study adds to knowledge, since this is of most interest to readers. The paragraphs on validity and generalisability could be more brief - there is no need to reiterate the aim and design - and come later.

8. There are a few minor errors of language: in particular, check that you use the verb "to lose" rather than the adjective loose; the end of the intensive phase of treatment is usually called “completion” rather than fulfilment; and a crisis is “precipitated” rather than released.
What next?: Accept after minor essential revisions

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: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

I declare that I have no competing interests.