Reviewer's report

Title: Dietary habits in three Central and Eastern European countries: the HAPIEE study

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Reviewer: Vladimir M. Shkolnikov

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Comments for transmission to authors

Your paper is informative and provides grounds for an important public health concern. There are, however, several comments to be addressed.

1. Although, the samples are drawn in a random manner from typical sites in each of the three countries, they are probably not nationally representative. At least, the samples do not include people living in rural areas and some of the sites (Novosibirsk) are geographically distant from places where most of the country’s population lives. It should be clearly stated whether the samples are nationally representative or not. If the latter is true, then throughout the whole paper the countries’ or peoples’ names (“Czech Republic”, “Poland”, “Russia”; “Czechs”, “Polish”, “Russians”) should not be used in a way as if one speaks about respective national populations. It would be correct to write instead: “Czech sample”, “Polish sample”, and “Russian sample”.

2. It would be good to acknowledge and briefly discuss certain socio-demographic characteristics and their potential impacts on the final results. It seems, for example that highly educated individuals are over-represented in the samples. What is the magnitude of this shift compared to the national and/or city populations and in which way this shift can influence the results.

It also seems that Krakow and Novosibirsk are substantially bigger according to their population size than the Czech cities. Is that right and can this difference influence the results somehow?

3. In the very first paragraph on p. 5 and in the second paragraph on p. 20, elevated CVD mortality and also its increase over the 1990s are connected with diet. It seems that this point has to be made with greater caution.

It is safe to say that poor diet was an important contributor to persistently high level of cardiovascular mortality in Eastern Europe in the 1970s-1980s. There are, however, diverging opinions on whether the diet change has seriously contributed to the rapid health improvements in Central Europe and to the rapid health deteriorations in the FSU over the 1990s. In particular, Rychtarikova (2004) argues that the diet and other behavioral changes in the Czech Republic in the 1990s were relatively insignificant compared to rapid and important improvements in the medical care system.

Regarding Russia and the FSU, most studies focus on alcohol and/or psychosocial stress as major factors of the recent health crisis. Although RLMS
monitoring registered certain diet changes over the 1990s, they seem to be not too harmful and could hardly produce a noticeable mortality increase (see studies by B.Popkin and colleagues for more detail).

4. On p. 18 diet changes are mentioned. It is important to discuss existing studies devoted to the diet changes and their health consequences in Russia and other Eastern Europe. Pay attention to papers by Poledne and Skodova (2000), the ones by Rychtarikova and by Popkin and colleagues (http://www.cpc.unc.edu/projects/rlms/papers.html) and (perhaps) some other significant works.

5. Minor problems:

The manuscript is full of abbreviations. A list of abbreviation in would be helpful for a reader.

In the Abstract (p. 3, para 2) “atleast“.

There is no explanation for “SFA” and “PUFA” (used in Table 4).

References


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