Reviewer's report

Title: High Acceptability for Cell Phone Text Messages to Improve Health-Related Communication among HIV-infected patients in rural Uganda: A cross-sectional survey study

Version: 1 Date: 15 March 2012

Reviewer: Megan Lim

Reviewer's report:

- Major Compulsory Revisions (which the author must respond to before a decision on publication can be reached)

1. It is not clear in this paper the exact type of communications that are being investigated. In the beginning, I interpreted the paper as describing opinions on patient-provider health communications in general, then it was about sending laboratory results, but at the end I think the aim was to suggest to patients with abnormal results that they should return to the clinic. In essence, the message is not truly sending actual lab results, but aims to get the patient to return to clinic. There is a multitude of ways that providers and patients could communicate via SMS, and I think this study refers to only one, which is fine, but it is not really clear from the manuscript. In the interviews, were patients given this as a specific scenario, or were they asked about SMS communications more generally? More detail is required on the specific scenario the researchers envision SMS being used for, if they had one.

2. No data are provided on the study response rate. It is important to know if the study participants differed significantly from the clinic population. This is particularly relevant to mobile phone use and ownership. By including access to a phone as an eligibility criterion, the researchers have biased the findings relating to outcome a) cell phone use. Did they collect data at the time of recruitment on how many people were not enrolled as they did not have a phone? Do they have estimates of phone use for their entire clinic population? If neither of these estimates is available it is a major limitation to the study.

3. There are some areas where I think the discussion could be added to. There were many benefits of SMS to patients which have not been discussed. For example, I found it interesting that several individuals mentioned an improved relationship with their caregiver, and an increased sense of empowerment due to the messages. I would also like to see some suggestions or discussion on how to deal with the anxiety created by receiving negative medical information in an SMS; vice versa there is the potential to alleviate anxiety when patients are sent normal laboratory results.

- Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)
4. I have two issues with the manuscript title. Firstly, it refers to communications ‘among HIV patients,’ but in reality the paper describes communications between patients and providers. Secondly, the term ‘health related communications’ is very broad, whereas the paper seems to be limited to suggestions for return appointments based on laboratory results (as discussed above).

5. On page 10, paragraph 2 – what is the meaning of “ABCDEFG”?

- Discretionary Revisions (which are recommendations for improvement but which the author can choose to ignore)

6. A paper looking at acceptability of cell phone messages among young people in Uganda has been published very recently. It might be useful to add this to the background – Mitchell et al, 2011, Health Educ Res 26(5) 770-81.

7. Have there been any other studies, anywhere in the world, investigating the use of SMS for sending HIV laboratory results? I don’t know of any, but I have not searched extensively. If not, this makes this study unique and the authors might want to note that in the introduction.

8. Of the various uses of SMS described in the 2nd paragraph of the background, most uses are very conceptually different from the aim of this study. The exception is return to care for STI treatment, which is very similar – i.e. send lab results and ask the patient to return. I would recommend focusing a little more on the STI treatment studies.

9. In the results section, manuscript page 10, the paragraphs describing ‘worries’ and ‘being startled’ are fairly repetitive of previous results.

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

**Quality of written English:** Acceptable

**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