Reviewer's report

Title: Promising outcomes of a national programme for the prevention of mother-to-child HIV transmission; impact of policy changes?: A retrospective study

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Reviewer: Laetitia Rispel

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Opening summary:

This manuscript reports on a retrospective review of the routine PMTCT programme in Addis Ababa, Ethiopia to evaluate changes in PMTCT programme utilization and to assess the impact of the national PMTCT programme in reducing MTCT. The routine monthly statistics collected on the PMTCT programme over a six year period were used. The study found that HIV counselling and testing (HCT) increased over the six year period; in part due to the policy shift from VCT to routine opt out testing, but that around 54% of HIV positive women and 41% of their infants received ARV prophylaxis in 2009. An increased proportion of women were referred for ART, but partners tested for HIV remains less than 20%.

Reviewer comments

Major Compulsory Revisions

1. The title: It is unclear from the title where the study was done, and the country of assessment should be included. In addition, the current title is misleading as the study was more an assessment of the PMTCT programme performance in Addis Ababa, as opposed to measuring the impact of policy changes. The latter would require a very different kind of study design. I suggest that the authors consider a revision of the title of the article.

2. Background: The overall manuscript would benefit from a language edit. End of first paragraph: it is not clear what the relevance of of the two sentences on discordant couples. It these sentences were included in order to preface the section on partner counselling, there is need to examine how the different paragraphs and arguments fit together. There are grammatical errors e.g. guidelines (I presume is it more than one) as opposed to guideline (second paragraph). Last sentence of second paragraph: change ‘to’ to ‘into’. The last paragraph of the background outlining the purpose of the study states:

“In this study we make use of .........assess the impact of the national PMTCT programme in reducing MTCT with respect to policy changes”. This sentence is
not clear. In addition, true impact studies measure changes in: HIV&AIDS trends; AIDS-related mortality; Social norms; Coping capacity in community and Economic impact-this was not the case. It would be helpful if the authors could clarify exactly what the objectives of the study were.

Lastly, it could be useful to have a brief description of the study setting, so that other readers could determine how similar or different the context was, and hence what aspects could be applied in their own settings.

3. Methods: There are some parts of the methods (parts of paragraphs 1 and 3) that would fit best under the background, rather than the methods. It would also be useful to indicate which output and outcome indicators of in were measured. In essence, routine statistics were used, and that is not a bad thing. I think the methods could be summarised more succinctly.

4. Data analysis: This section is very cryptic and requires further explanation on what was analysed and how the analysis was done. Suggest revision in the light of comments made under methods (above). The appropriateness of the statistical tests used, should also be justified.

5. Results

This section requires major revision.

Looking at the annexure that was included, the authors in essence relied on routine statistics-these are a wonderful data-base, but at the same time routine statistics suffer from the usual problems of completeness, quality gaps and that they were not necessarily designed with research objectives in mind.

Trends in HCT It is odd to refer to the proportions/ percentages calculated as probabilities, as it makes the manuscript difficult to read. The presentation of the results is mixed with some interpretation (see the sentence starting with ‘although the drop appeared to be .....suffered the same poor utilisation’).

HIV testing versus HIV prevalence

Would it not be useful to only focus on first visits, as repeat visits are difficult to interpret? For example, 10 visits could be one women visiting 10 times, or 5 women visiting twice.

The last sentence in this section “During.....compared to 2004” Is this finding not simply a function of the data sources and/or completeness of the data?

ARV prophylaxis utilization

Do the authors not mean uptake of ARV prophylaxis?

Referral for treatment, care and support?

Two of the sentences indicate that HIV positive women were 11X and 18X more likely to be referred for treatment. It is not clear which were the comparison groups: the authors should state which group of HIV positive women is being compared with which other group. If the comparison is across years, there should be some indication as to the comparability of measurements.

Infant feeding counselling
The authors go beyond the findings of a record/ routine statistics review, as there was no way to verify the accuracy of the information recorded (unless they were personally involved in the setting up of the M&E system). It is fine to state that there was an increase in the reported infant feeding counselling. However, to state that HIV positive women had a 50% chance to receive infant feeding counselling implies that this was a somewhat random event.

HIV infection among exposed babies

What does “Evaluable babies” mean?

6. Discussion:

First sentence: The study was simply a review of routine statistics. Although it is useful programme performance evaluation, it did not measure the impact of the national PMTCT programme. The bit on “in response to changing policies’ does not make sense.

The sentence on “the HIV prevalence decreased steadily” I do not understand the sentence. It could be that in the early years, more HIV women were tested, so it gives an artificial high figure. Also, what percentage of women in Addis actually utilise health care facilities?

It is unclear what comparisons were used and whether it was appropriate to compared from one year to the next, as different facilities came on board, and hence the authors are may not be comparing the same outputs.

The sentence: “although only around 10% of the HIV positive women…. the impact of the programme was remarkable”. This might very well be the case, but we do not know what happened with the vast majority of infants. Hence, the authors should be more circumspect in their interpretation and conclusion.

It appears from that data, that there were many missed opportunities in the health services, and this is hardly mentioned or discussed by the authors.

Paragraph on page 15: “The expansion”. It is unclear from the manuscript whether the routine information includes private providers, so the discussion appears to be somewhat out of context.

Second paragraph on page 15: “the utilization of “...There were missed opportunities, but the sentence is not linked to any particular finding, so it appears as a non-sequeter.

Third paragraph on page 15: This is a spurious statement-cf earlier comment on the data limitations and the need to interpret the decline with some caution –i.e. is it a true decline or simply a data error.

Page 16: second paragraph-the authors go beyond the findings of the study. There is sufficient and useful information in the study to discuss, and the authors should focus on the actual findings in the discussion section.

Page 17: second paragraph-this is one of the most important statements in the manuscript as it accounts for the poor coverage both with ART and infant prophylaxis.

Pages 18 and 19: It is often difficult to see which aspects of the results are
discussed: suggest the authors tighten the discussion and link it closely to the findings, supported by literature from other studies.

Page 19: second Para: Please clarify the second sentence commencing with: “the infants tested”

Page 20: Para with: “The proportion of partners”. Is part of the solution not to increase partner testing, almost as an indirect output of the PMTCT programme? Again the relevance of the discussion on discordant couples is not clear.

7. Methodological limitations:

There are methodological limitations of using the routine M&E statistics, and these are not explored. Suggest that the authors highlight these limitations in the discussion section. I am surprised that there was no mention of the quality of record keeping or the information collected.

8. Conclusions:

This is cursory, and there are no recommendations that arise from the study. Surely, the study points to reducing missed opportunities in the health services, measures to increase ARV uptake during pregnancy and to the infants, follow up of infants, etc.

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, and I have assessed the statistics in my report.

Declaration of competing interests:

I declare that I have no competing interests