Reviewer’s report

Title: Effects of Health Services Quality on the Use of Intrauterine Devices in Egypt

Version: 1 Date: 16 December 2005

Reviewer: Eric Seiber

Reviewer’s report:

1. Is the question posed by the authors new and well defined?

Yes, the question is clear and very relevant. Despite the common assumption that quality matters, very few studies have been able to successfully demonstrate that quality influences utilization.

2. Are the methods appropriate and well described, and are sufficient details provided to replicate the work?

Major Compulsory Revisions
a. The cluster sample design of the DHS requires a correction in the standard errors of the estimation to produce valid results, otherwise the p-values are misleading. It is unclear in the manuscript if the authors made this correction. This correction is trivial in STATA when using the survey estimators and DHS data (set the STATA primary sampling unit to the DHS cluster). If already done, only a few sentence change is required.

b. I found the Quality index very difficult to interpret. Why did the authors aggregate the four very different quality proxies into a single index? From a programmatic standpoint, it would be much more informative to know which quality proxy actually matters (use four different quality measures). If quality was of secondary interest, the aggregate index would be justified, but it needs more careful design since it is the main focus of the paper.

c. Despite quality being the central focus of the paper title, the manuscript dedicates only two sentences to the quality results. The analysis of the quality measures needs substantially more development. As the paper is currently written, the focus would be more accurately described as the determinants of IUD usage in Egypt.

Minor Essential Revisions
d. How is “Married Women” defined? I am not familiar with the Egyptian context. Is that only formal marriage or does it include common-law marriages (the broader “Women in Union” definition).

Discretionary Revisions
e. When using multinominal logit, simulations using predicted probabilities are very helpful in interpreting the magnitudes of the relative risk ratios. I believe that David Hotchkiss has several MEASURE publications that use this approach.

3. Are the data sound and well controlled?

Yes, the DHS is the gold standard of international data sets.

4. Does the manuscript adhere to the relevant standards for reporting and data deposition?

See comment 2.c.
5. Are the discussion and conclusions well balanced and adequately supported by the data?

Minor Essential Revisions
a. The manuscript may be making a stretch by claiming to be first to use geographic information
to link a population based survey to an independently sampled health facility survey. It is always
awkward to mention in a review, but I was involved in three MEASURE affiliated articles that used a
dataset that linked the DHS to a facility census in Guatemala, see Bertrand JT, Seiber EE, and
Escudero G (2001) and Seiber EE and Bertrand JT (2002), and Seiber EE, Hotchkiss DR, Rous JJ,
and Berruti AA (2005).

6. Do the title and abstract accurately convey what has been found?

No. Little of the paper’s results and discussion look at quality; mostly the focus are the general
determinants of IUD utilization. See comment 2.c.

7. Is the writing acceptable?

Minor Essential Revisions
a. “constraints” is misspelled in the first sentence of the last paragraph on page 12.

What next?: Unable to decide on acceptance or rejection until the authors have responded to the
major compulsory revisions

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

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests.