Reviewer's report

Title: How far will we need to go to reach HIV-infected people in rural South Africa?

Version: 1 Date: 12 March 2007

Reviewer: Helen Schneider

Reviewer's report:

General

This short debate article raises the important issue of distance to facility as a major determinant of utilisation, and demonstrates, using modelling techniques, the likely access to ART in Kwazulu-Natal Province in South Africa based on current distribution of services.

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

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No definition is given for a health care facility, but from the numbers provided (a total of 54), this appears to exclude the primary health care system. If this so, this needs to be made explicit as current proposals are for mainstreaming nurse-initiated treatment into the primary health care system (as in Lusikisiki, see below). It would be very interesting to see what levels of utilisation would be achieved if treatment was accessible through the several hundred clinics in the province (especially in rural areas).

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Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

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Discretionary Revisions (which the author can choose to ignore)

Page 3: In referring to the MSF experience, the more recently reported Lusikisiki experience in the Eastern Cape may be more pertinent. Recent documents the authors may find interesting are: Achieving and sustaining universal access to antiretrovirals in rural areas: the primary health care approach to HIV services in Lusikisiki, Eastern Cape, MSF, Cape Town, October 2006. Available at: www.msf.org/sa Ford N et al. Sustainability of long-term treatment in a rural district: the Lusikisiki model of decentralised HIV/AIDS care. The Southern African Journal of HIV Medicine, December 2006, pages 17-22

The authors correctly recommend research “on distance that PLWHA are able to travel for treatment”. Would add a cost dimension to this.

Which journal?: Appropriate or potentially appropriate for BMC Medicine: an article of importance in its field

What next?: Accept for publication in BMC Medicine after minor essential revisions

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests