Author’s response to reviews

Title: Frequency of self-medicated antibiotics, factors leading to their administration and knowledge of their adverse effects among non-medical university students of Karachi: A cross-sectional study

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Dear Editor

We went through the reviews and would like to thank the reviewers that they took out time to analyze our manuscript. Their comments are very encouraging and will help us a great deal in our future research projects as well.

We will address the concerns of the reviewers one by one.

Dr Shehnaz Ilyas

Major revisions: we have tried to describe the questionnaire in more detail this time in the data collection tool section and I hope this detail would answer the few questions raised over the questionnaire. We did carry out a pilot study initially but forgot to mention it. We have briefly described our pilot study in the same section as well. Regarding the calculation of prevalence, I have to say that we simply used the frequency tables generated by SPSS to calculate the prevalence of self-medicated antibiotics in non-medical students and I have now mentioned that in that sentence. It is a frequency essentially but it can be taken as the prevalence in non-medical students.

Minor Revisions: We have adopted the one suggested by the respected reviewer. We have now modified our questionnaire part and that would describe the questions assessing the frequency or point prevalence to a greater extent. Also, we have provided out justification for choosing the 6 months period for the use of antibiotics, and have discussed that one of our reasons was to eliminate recall bias. We have done the changes requested in table 1 but the >5 year column has been kept there because there are a few students anyways in that
group. Similarly, changes have been made to table 2. We have described the basis for students mistaking medications for antibiotics. I think we have already discussed the difference between the perception of adverse effects of self-medication between self-medicating versus non self-medicating students to some extent and have added the frequencies to the results section. However, as our questionnaire wasn’t significant for this issue specifically, we have not discussed it in much detail. The statement regarding the proportions of males and females has been changed. A statement was added regarding the association of knowledge of antibiotic resistance and the use of self-medication. There was no mention of a recall period in the studies mentioned. Certain facts in discussion like (selection of antibiotics; knowledge about antibiotics; proportion of self-medicating students who had knowledge about adverse effects) that were just mentioned in the discussion were mentioned in the results as well. The references have been looked into and corrected. A WHO reference which was previously reference number 6 has been removed because we couldn’t find it properly. However we couldn’t find some new studies on some specific issues, we have kept the old studies as they are in our references.

Dr Monica Lamberti

We did ask about the number of days the antibiotic was used but we included all the antibiotics that were used no matter for how many days because we thought even the incomplete and inadequate use of antibiotics was significant in the development of antibiotics resistance among a community. However as our main objectives were to find out the prevalence of self-medicated antibiotics, factors leading to their administration and the knowledge of adverse effects including resistance, that is why we didn’t specifically evaluate if the medications used were adequate in dosage and we thought being non-medical students, they would find it hard to recall even.

We asked in our questionnaire about the recommendations for choosing the antibiotics and that have been discussed in the results. However we didn’t ask if the choice of antibiotics was random because we thought that it was understood that the choice would be based on the knowledge of the the people recommending these. Repetition of antibiotics usage within those 6 months was also not asked because of the same reason that the initial objectives of the study were to keep the questionnaire as simple as possible while looking for the prevalence of self-medicated antibiotics, factors leading to their administration and the knowledge of adverse effects including resistance. And asking about repetitions would not have had any effect on the prevalence of self-medicated antibiotics among the non-medical students.

Thank You

Syed Jawad Shah