Reviewer’s report

Title: Indications and complications of intestinal stomas at a tertiary care hospital in a resource-limited setting: A Tanzanian experience

Version: 1 Date: 27 Jul 2018

Reviewer: Reviewer 2

Reviewer's report:

PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: This study is really a quality improvement study for their hospital and cannot be taken as indicative of the practice of surgery throughout Tanzania or Africa as a whole. The group has done a complete, well carried out analysis of their results in their hospital, but what this report lacks is a good contrast of the practice at their hospital in their population versus what has been reported before in the literature. There is not an attempt to contrast the population of differences in practice of previous reports from non-Tanzanian or African groups who see a different patient population, especially the lack of children with such problems, who would be referred to a primary pediatric surgeon, not a general hospital that treats all comers like this one. A major potential problem is the very blatant description of the markedly increased complication rate of these operations done by junior doctors, who they clearly state are not adequately trained, yet they are still the ones doing the majority of these cases without supervision. In fact, there is only one brief statement saying that these junior doctors "should" have more supervision, and they don't describe that in their hospital such increased supervision has been established or how it was done. Indeed, there is no outcry to FIX THIS PROBLEM! This will need to be addressed before the submission can be considered for publication.

REQUESTED REVISIONS:

The first sentence of the introduction is directed at non-physicians and certainly not surgeons. Which audience are you addressing, because for surgeons, this paragraph is not appropriate.
You need to work on verb tense, singular and plural words. You need the help of an English Editor.
Page 4 line 48: include diverticulitis.
Page 5 Line 4+5 begs the question of what are the complications - you should define them and move this sentence down to the next paragraph. Also, it would be better to add "colonies and small bowel obstruction" to the list.
Page 7 Lines 4-31: were there any patients who had a stoma done during a colectomy or other intra abdominal procedure that was part of a definitive operation. All the stomas you describe sound like they were done as bypasses or for decompression!
Page 7 Line 47: the mean value is not appropriate. Delete it or describe the median and interquartile range; the mean is not statistically accurate with this range.
Page 8 Lines 19-25: too many significant figures are shown in the months. Also, be certain to define that Lines 17-25 relate only to children!
Page 8 Line 51: please define junior doctors and if they were supervised. This is a potentially big problem! Be careful! You are going to need to discuss this in the discussion, especially with the incidence of complications related to their formation and not the underlying diseases for which they were constructed. Also, most surgeons try to avoid transverse loop colostomies because of the known problems with them. They have gone out of favor in the last 25 years and are constructed only very rarely in most practices.
Page 10 Line 58: these practices are very different from yours and really cannot be compared unless you define the differences. Also, the sentence on Page 11 Lines 7-8 is naive. Of course there are differences in the patient populations - the situation is markedly different!
Page 11 Lines 22-25: of course the differences are obvious, as there are different patient populations. Did refs 11 and 13 involve pediatric patients or only adults? Are those studies done in Africa? You need to be more definitive with your explanations of these differences. Moreover, why is this important to you in your goals of this study?
Page 12 Lines 14 and 15: Then why were they allowed to do it without supervision?
Page 12 Lines 35-50: did skin problems vary with colon vs ideal stomas? They should have!
Page 13 Line 7: Then why were they done?
Page 14 Lines 4-40: What have you done to address this very obvious problem?

ADDITIONAL REQUESTS/SUGGESTIONS:
This manuscript really is a quality improvement study for their hospital and cannot be used as a general manuscript representing this surgical practice across Tanzania or for that matter across the different countries in sub-Saharan Africa. Moreover, the study clearly defines action items that need to be taken - most blatantly the lack of supervision of junior doctors in even doing these operations without direct supervision, or better education and training in how to do these colostomy formations, or even the use of a loop transverse colostomy, which should almost never be done because of the very well known complication rate of this procedure!

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

No

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

No

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review? 
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

**Quality of written English**
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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