Reviewer’s report

Title: Hepatitis C Virus infection in Irish drug users and prisoners – A scoping review

Version: 0 Date: 09 Nov 2018

Reviewer: Anne Oevrehus

Reviewer's report:

Major comments

General

The aim of the paper is to identify gaps in the literature on HCV infection in Irish PWUD and prisoners

To make a scoping review seems like the optimal method for the question and although not an often encountered method in infectious diseases. I think it is of general interest and an inspiration for other countries. Papers on what research is missing is definitely something to be pursued. However the paper also present a lot of results of papers and that is somewhat confusing as it is somehow a narrative review within a scoping review.

The paper would benefit from more focus on being a scoping review an less on the findings in single papers.

Specific

The paper is hard to follow as the method with regards to chosen structure of the charting of results is not explained and (at least not to me) entirely logic (like health policy papers in between prevalence and treatment outcomes)

A more rigorous structure on stage 4 and 5 (Stage 4: charting the data, Stage 5: collating, summarizing and reporting the results) in the model is in my opinion needed. The current structure is a mix of populations and incidence/prevalence in the results/epidemiology section although studies can be in both categories. Some studies are very old and some might have (uncommented) methodological flaws.

Test uptake - a very important parameter should have its own section and not be mentioned in between the other sections
Suggest for the epidemiological section that the authors consider the following and consider dividing the studies in recent (fx 2008-2018) and pre 2008 or differentiate studies in time dependent or not (like HCV health related issues less likely to be time dependent and subheadings as example below.

Sometimes PWUD is used interchangeable with PWID and that can be confusing

Sub-headings

Test uptake
- Prisoners
- PWUD +PWID sub population

Incidence
- Prisoners
- PWUD +PWID sub population

Etc. etc.

Additionally the method section state using the 6 stage model, but the 6th stages - which is: Consultations with expert and stakeholders have not been performed.

In the discussion several references to the lack of data on or the prevalence in the general population is made - but as the search strategy were not tailored to the general population this cannot be surprising.

I suggest the discussion is structured in such a way that single paper results are discussed separately from the scoping review results of research "gaps"

Table 1 comprehensively report the studies but is being very long and structured by date and not subject makes it very hard to follow. I suggest that table 1 either states which study is used for which category of results or dividing the table into sub tables if possible.
Minor comments

Abstract: "Prison based in-reach hepatology" not a common concept consider revising

Introduction:

Line 29-42: To what extend is notifications subject to bias: Is the reporting lab reported or based on phycians reporting:

Line 45-48: Second and 3rd estimation on the prevalence of HCV in Ireland - how is it methodological different from the one mentioned in line 12?

Page 5 line 36-42 - an absolute or relative number for decrease in opiate use for entrants into treatment would be useful - and the decrease in injecting is maybe significant but numerically not that big (7 percent points)

Page 7: line 24-25 "a strong bias towards retention" Is bias the right word for this process?

Page 7: line 49-53 - Suggest inclusion criteria is moved a few lines up before the process for exclusion is described

Reporting of studies

General

Is HCV prevalence and incidence based on anti-HCV or HCV-RNA? Assume the latter as anti-HCV is specifically mentioned for some studies - but consider defining in method

Sometimes the year or year span of studies are mentionend - sometimes not - it makes it a bit hard to follow and relate to the usefulness of the studies. Suggest including the year for the majority of studies or change structure

Like in page 10 (line 37-40)

Reporting of numbers vary - sometimes 13, 000 sometimes 13000 sometimes 13,000 - suggest consistency

Referencing to the same study multiple times in the same paragraph/sub-section is confusing. Once is enough
Examples:

Page 10 line 50-59 triple reference to study 39
Page 11 - Line 8-16 double reference to study 47

Section on PWUD

Information on history of injecting among PWUD in all studies - any evidence on HCV in Non-injecting drug use?

Page 12 line 21 - you mean a history of IDU?

Section on treatment outcomes

Page 13 line 7-10 - "post interferon based treatment" is a little misleading - suggest - SVR rates of or from Interferon based treatment not to confuse with the DAA -era. Was "poor follow-up" a cause of low SVR rates?

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

Yes

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

Unable to assess

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

Yes

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:

Acceptable

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