Author’s response to reviews

Title: Prevalence of Self-medication with Antibiotics and Associated Factors in the Community of Asmara, Eritrea: A descriptive cross sectional survey

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Reviewer 1: Shazia Jamshed

1. Instead of beginning from scratch and develop our own questionnaire we surfed over the journals online for similar questionnaires of similar studies. We found many, but we stucked with the cited questionnaire from KSA. The background information that we believe would most likely to be impacted by culture was not taken from the questionnaire, instead we developed our own background questions. I think that explains the cultural adaptability we made.

2. Our main objective at the beginning was to assess the prevalence and identify the factors that affect SMA (Self-medication with Antibiotics), but there were few questions as explained in the technical terms that enabled as to probe the respondents’ knowledge minimally. Knowledgeable are those participants whose answer about, what antibiotics are, what they are used for, and whether antibiotics could treat common cold or not were correct and waited till the completion of course of treatment with antibiotics. Any incorrect answer for any of these questions renders the respondent as unknowledgeable. (Page 5, Operational definitions)
3. I have reviewed the article ‘Self-medication practice and associated factors among students of Asmara college of health sciences, Eritrea: A crossectional study). The main thing is that it was conducted after our study that is 21st May – 23rd June 2018. Whereas our study was conducted September to November 2017. And that doesn’t defy our statement because it’s conducted generally to assess self-medication as a whole. But our work is more specific in that it assesses SMA only and is community based.

4. Generally, Chi Square analysis is used to find out the presence of association between the dependent variable and any of the independent variable. But this alone, doesn’t explain the magnitude as to what degree the variables affect each other. Therefore after finding the association from the cross tabs (Chi square), we went for the univariate logistic regression analysis, or the odd’s ratio to know the degree or the odd (Crude odd’s ratio). But certain variables known as confounding variables might deviate the degree in any direction, therefore it’s necessary to run the multivariate logistic regression to omit the effect of the confounding variables hence the term Adjusted odd’s ratio.

Reviewer 2: Marilla Correa Da Silva, Ph.d,

1. It was not easy to find similar studies that was conducted to assess the SMA practice in the community. Given that we don’t have internet access anytime we wish, that was the best we could come up with. Since those studies that you mentioned were cited in order to give more insight about the topic and were not necessary and doesn’t affect our work entirely we would like them to stay as they are given the internet access we have is so limited and weak. But if u believe they should be omitted let us know, to check if we could make some replacements.

2. Generally, as per the time we conducted our research, there are 52 OTC drugs in Eritrea. But no antibiotic was part of them. Recently, the authorities are on a project to schedule the antibiotic to limit which antibiotics are allowed to be in the shelves of the drug outlets, because there are three types of drug outlets in Eritrea, i.e. Pharmacies, Drug stores and Rural Drug Vendors (RDVs) but since the work is yet to be published we cannot include that in our manuscript. No drug is allowed to be sold in any trade centre outside the drug outlets, not in groceries or anywhere else.

3. Our research work is very fast, we chose to come up with a shorter discussion section so that we could say a lot about our results, given the limited space we should adhere to.

4. We added the percentages and made some modifications in table 1.

5. The English version of our questionnaire is uploaded as an appendix as was requested.