Reviewer’s report

Title: Barriers and facilitators with medication use during the transition from hospital to home: a qualitative study among patients

Version: 0 Date: 09 Nov 2018

Reviewer: Yu Heng Kwan

Reviewer's report:

This is an interesting and important manuscript on medication management program. However, some issues are concerning:

1) The concept of medication management is wide and broad, including adherence, pharmacist intervention etc. However, the topic guide only talk about barriers and facilitators on medication use with transition from hospital to home, and the suggested facilitators to that. I feel there need to be more explanation on why is this the focus in the intro. The jump was very quick from MRP to barriers and facilitators of medication use. I felt there need to be some address on medication adherence.

2) Furthermore, the setting of the study wasn't well clarified. I conducted some systematic reviews of medication adherence (https://www.ncbi.nlm.nih.gov/pubmed/28681249, https://www.ncbi.nlm.nih.gov/pubmed/26482548), although the reasons are largely the same but there are some reasons for difference. The topic guide and patient group need to be clear as it dictates how to ask the qns (in this case, disease and therapeutic factors are completely missing), that's why the ideas seems very limited. I listed 2 systematic reviews above - 1 rheumatology, 1 geriatrics to emphasis that it may be different at the details which is crucial to develop needed interventions for MRP as mentioned by the authors. Therefore, to improve, we need to define the population studied clearly and why this in this study. Different transition care patients profile will definitely result in different program needed. And from there, teh topic guide need to be further improved based on that. These crucial issues are missing in this study

3) I will like to ask if the study did achieve saturation to conclude the study in this way. I felt that to achieve saturation with 3 focus groups with such a broad topic is extremely amazing. I remembered doing a qualitative study myself and this is not very attainable. I felt at least 5-6 as per stated in the literature with about 5-7 patients each are essential. These will results in about 30-50 patients. I understand that qualitative study the number is not an absolute one but to achieve saturation with 3 needs quite a bit of convincing myself. I feel more data is needed to clearly ensure that a robust sampling frame is achieved. As the sample and sampling method wasn't well defined, I cannot comment on the frame needed and this is crucial towards understanding the diversity of views for this study.

In view of the above major concerns and the fact that this is an important topic, i will encourage the authors to define a proper sampling frame, sampling method and review the topic guide and increase
the focus group number to achieve a more robust qualitative study. If the authors wanted to do a qualitative study as part of a larger RCT, the title and objectives may need significant changes such as barriers to XX intervention and facilitators to make it more tune for the data presented.

Thankful for the opportunity to review this interesting manuscript.

**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

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Please indicate the quality of language in the manuscript:

Acceptable

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