Peer Review Report

Review Report on Secondhand smoke exposure in Lao People’s Democratic Republic: Results from the 2015 National Adult Tobacco Survey.

Original Article, Int J Public Health

Reviewer: Sean Semple
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EVALUATION

Q 1 Please summarize the main findings of the study.

The study examines data from a nationally representative survey in Lao PDR to characterise exposure to secondhand tobacco smoke in different micro-environments. Data are presented and compared with other countries in SE Asia.

Q 2 Please highlight the limitations and strengths.

Strengths
Large, nationally representative sample
Comprehensive analysis using appropriate statistical techniques.

Weaknesses
Self-report with no objective measurement of exposure.
Questions used may over/under estimate exposure due to assumptions around 'seeing someone smoke' being equal to exposure; and also that smokers may not identify being exposed to SHS if they are the only person smoking.

Q 3 Please provide your detailed review report to the authors. The editors prefer to receive your review structured in major and minor comments. Please consider in your review the methods (statistical methods valid and correctly applied (e.g. sample size, choice of test), is the study replicable based on the method description?), results, data interpretation and references. If there are any objective errors, or if the conclusions are not supported, you should detail your concerns.

This is a timely and well presented analysis of exposure to SHS in Lao PDR that provides useful data showing the extent of population exposure and calling on the need for public health policies to help reduce exposure. The manuscript is well written and easy to read/understand. The discussion provides useful comparison with data from other countries in SE Asia. I have a small number of minor comments.

Methods - line 64 provide details of the Commcare software - manufacturer, version number etc.

Methods line 66-71 - ‘seen anyone smoke’ in each place within the past 30 days - so if I’d seen someone smoke outside the entrance to my workplace or in a designated outside smoking shelter at my workplace then this would be classified as ‘SHS exposed’. Similarly, the question asks about seeing anyone smoke – so for smokers who are the only person smoking in that environment then they may have responded ‘no’ despite their being exposed to SHS from their own cigarette.

Discussion line 112 - the comparison to other SE Asian figures is useful though it should be noted that the data from these countries may be from surveys completed up to 7 years previously [2008–10]. It is worth speculating whether figures will have increased/decreased in these countries over this time and thinking about how comparable the questions are between this survey and the GATS approach.
Discussion weaknesses could highlight that some biologically verified data on SHS exposure exists in SE Asia and in other countries e.g. https://pubmed.ncbi.nlm.nih.gov/29228385/ and https://pubmed.ncbi.nlm.nih.gov/30158211/

Discussion weaknesses could highlight some of the issues I mention previously around the questionnaire and smokers not recognising their own smoking as producing SHS.

Conclusions line 173: “There are the needs for more comprehensive smoke-free policies at government-owned workplaces and facilities” should change to ‘There is a need for more...’

Tables well presented and appropriate.

PLEASE COMMENT

Q 4 Is the title appropriate, concise, attractive?
Yes,

Q 5 Are the keywords appropriate?
Yes

Q 6 Is the English language of sufficient quality?
Yes, generally excellent. I identified a small number of typos.

Q 7 Is the quality of the figures and tables satisfactory?
Yes.

Q 8 Does the reference list cover the relevant literature adequately and in an unbiased manner?)
Yes – I have suggested a couple of useful citations that could be added to develop the discussion in relation to the lack of objective measurement and reliance on self-report.

QUALITY ASSESSMENT

Q 9 Originality

Q 10 Rigor

Q 11 Significance to the field

Q 12 Interest to a general audience

Q 13 Quality of the writing

Q 14 Overall scientific quality of the study

REVISION LEVEL

Q 15 Please make a recommendation based on your comments:
Minor revisions.