

Peer Review Report

Review Report on Euthanasia and physician-assisted suicide in people with an accumulation of health problems related to old age: A cross-sectional questionnaire study

Original Article, Int J Public Health

Reviewer: Christopher Kofahl

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EVALUATION

Q 1 Please summarize the main findings of the study.

The study gives very interesting insights into the factors and determinants on both patients' and physicians' sides with respect for asking (patients) for euthanasia or physician-assisted suicide and for granting (physicians) these requests. The focus is laid on people with an accumulation of health problems related to old age, which means not only terminally ill persons but also people with even a longer life expectancy who are tired of life for different reasons, or are suffering, respectively.

Q 2 Please highlight the limitations and strengths.

Strengths and limitations are sufficiently and well described by the authors themselves. I simply agree with them.

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.

Dear authors,

Thank you very much for this interesting paper. In my perception, the topic of EAS and the discussion about it are globally increasing. I think there is a big need to learn from practical experiences and concrete studies like those, you are providing, for political and personal decision making as well as for balancing the different aspects and factors in the (public) discourse.

I only have very little to add or to comment on. The paper is well structured and rigorously written.

Keywords:

Is "Accumulation of health problems related to old age" an appropriate keyword?

"an accumulation of health problems related to old age" - This is a rather long term. I fully understand that this is the correct description of the relevant group under study, and that is why it is used nearly thirty times in the manuscript, which I found a bit annoying because it blows up the sentences so significantly and sounds in its repeating full length ostinato very technocratic. Wouldn't it make sense to find and use an abbreviation or an acronym to make reading a bit more fluent?

Abstract:

l. 8-13: It would be nice if you could formulate the first two sentences as proper and more readable sentences.

Studies involving human subjects:

Please check this paragraph, there is assumably a cut & paste problem.

Text:

I. 91 "In 3.7% of patients, EAS was performed, and in 4.3% of patients, EAS was refused." – As this refers to a subgroup of those 8% with the accumulating health problems I would find it easier to read as follows: "In 46% of them, EAS was performed, and in 54% of them, EAS was refused." Just a suggestion.

I. 161: "three separate multivariable logistic regression analysis" -> analyses

I. 162f.: "Before adding the variables in the multivariable regression, we checked that they were not highly correlated with each other using the Pearson correlation coefficient. There were no variables excluded from the multivariable analysis due to a high correlation (Pearson correlation coefficients were below 0.6)." – I would say that 0.6 is a rather high correlation, (although knowing that literature suggests that only correlations above 0.8 are indicating a severe problem concerning multicollinearity, which you are addressing here). The standard procedure for assessing a possible multicollinearity, however, is the calculation of variance inflation factors (VIF). This is integrated in SPSS as part of linear regression analysis under "Statistics" -> "Collinearity diagnostics". I would suggest you run the VIF-test to check whether all indicators have a value below 10 to be "on the safe side".

Table 3

"Row percentage" – this might be a bit confusing. This is the percentage of patients granted EAS of all requesting for EAS, isn't it? This is also affecting the other tables.

Univariable and Multivariable OR are identical, and one is in bold letters, and the exactly same other is not. I guess this is a kind of copy & paste mistake. Please check.

I. 261: "Our research, showed..." -> no comma

I. 296: "... five states in Australia, ..." -> There are six states (see: <https://www.healthdirect.gov.au/voluntary-assisted-dying>)

PLEASE COMMENT

Q 4 Is the title appropriate, concise, attractive?

Yes. (It is technically and formally correct, hence, maybe not too attractive.)

Q 5 Are the keywords appropriate?

Yes.

Q 6 Is the English language of sufficient quality?

Yes.

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.

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.