Qeios

Peer Review

Review of: "Prevalence and Factors Associated with Non-communicable Diseases Among People Living with HIV at Kalisizo Hospital in Kyotera District, Uganda: A Cross-Sectional Study"

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Major Issues Requiring Revision

1. Limited generalizability and single-center design

The study population was drawn from a single hospital HIV clinic, which may introduce selection bias and limit external validity.

Suggested improvement

Provide discussion on how clinic-attending PLHIV may differ from community-based populations.

Clarify referral patterns and whether patients with advanced disease stages are overrepresented.

2. Cross-sectional design limits causal interpretation

Although acknowledged in the limitations, several sections of the discussion imply causal relationships.

Suggested improvement

Replace causal wording with associative language.

Emphasize temporal ambiguity between ART exposure, lifestyle risk factors, and NCD development.

3. Potential residual confounding from ART-related variables

Important HIV-related factors influencing NCD development were not fully explored.

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Suggested improvement

Include or discuss:

ART regimen classes and duration

Viral load suppression status

CD4 count levels

Treatment adherence

These variables are known determinants of metabolic and cardiovascular risk among PLHIV.

4. Depression measurement threshold concerns

Using a PHQ-9 score ≥5 as depression classification may overestimate prevalence because this threshold represents mild depressive symptoms.

Suggested improvement

Justify the selection of the cutoff score.

Consider a sensitivity analysis using a ≥10 cutoff to identify moderate-to-severe depression.

5. Interpretation of tertiary education association requires deeper explanation

The observed association between tertiary education and higher NCD prevalence is counterintuitive.

Suggested improvement

Explore possible mediating factors such as sedentary occupations, urban lifestyle exposure, or healthcare utilization differences.

Compare findings with socioeconomic transition models in LMIC settings.

Methodological Clarifications Needed

Sampling procedure

Clarify:

Whether appointment-based sampling could introduce systematic exclusion of irregular clinic attendees.

How replacements may influence randomness.

Measurement reliability

Specify:

Calibration frequency for BP and glucometers.

Whether repeated FPG measurements were performed to confirm diabetes diagnosis.

Outcome definition

Clarify whether:

Participants with multiple NCDs were counted as multimorbidity.

Composite outcome weighting was applied equally across conditions.

Minor Issues

Terminology consistency

Use standardized terminology such as:

“PLHIV with NCD multimorbidity”

instead of “selected NCD prevalence.”

Reporting clarity

Declarations

Potential competing interests: No potential competing interests to declare.