

# Review of: "Auditing the Cost of Treating Hypertension in a Tertiary Health Facility in Yobe State, North-Eastern Nigeria"

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**Potential competing interests:** No potential competing interests to declare.

Title- appropriate

Abstract

Include USD equivalents.

Abstract conclusion is inconclusive as “on the high side” doesn't mean anything scientifically

Introduction

I would like to see a more recent prevalence stated for hypertension in Nigeria as the cited 2010 study might not be the same as today. There have been other recent and more relevant prevalences.

Methods

I am quite surprised that the last state census stated was 2006. A quick internet search states there was a Nigerian census in 2016.

Results

I suggest the authors include age ranges to give readers a good idea of who the participants of the study are (for eg., young adult vs. elderly, etc.).

I am not sure of the relevance of including the ethnicity of participants.

"Alpha Methyldopa was the most costly anti-hypertensive medication prescribed (₦3,600), while Bendroflumethiazide was the cheapest (₦ 225)" The authors do not state how they arrived at these amounts. Are these from the hospital pharmacy, community pharmacies, or the average cost of drugs from all the above? And what will intrigue readers is also where the patients received their medications.

Table 5. The authors did not state why *data for only the 123 employed respondents was included*

## Discussion

Might be appropriate to compare the cost to standard currencies such as USD to make it easier for everyone to understand.

Authors did not state anything when it comes to insurance coverage. I think that will also interest a lot of readers.