

## Review of: "Tobacco Smoking-Attributable Mortality in Kenya: 2012 – 2021"

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Potential competing interests: No potential competing interests to declare.

This is a very interesting study assessing Tobacco Smoking-Attributable mortality in Kenya. The authors gave a good background to the study, highlighting the various risks of tobacco smoking. The design of the study is well-explained, as well as the sampling procedure.

- 1. In presenting the description of the results, I would suggest the median age and inter-quartile range be stated. That will present the reader with an overview of the group of persons most affected.
- 2. Table 1: Including the percentage alongside the absolute numbers will give a better picture of the findings so one can better compare which proportions of deaths were related to malignant cancers and which proportion was as a result of CVD.
- 3. Table 2: What unit are the parameters presented in? Do indicate the unit in the column headings.
- 4. Do ensure consistency in decimal places when presenting the results. E.g., Table 2: Total / current has two decimals (12.85) while Age 35-64 years / Current has one decimal (13.5).
- 5. Smoking prevalence and Table 2: you describe in the paragraph that 17.4% of men, 0.9% of women .... And site records are being in Table 2. Unfortunately, I don't see these present in Table 2.
- 6. Table 3: Do indicate the unit of measurement. E.g., Table 3: Observed Mortality (/n) or frequency, Prevalence estimate (/%) or percent. If you could introduce percentages for the totals in Table 3, for example, total % of females against males in the observed mortality and percent of females and males in smoking attributable mortality. This is a comparative study, and percentages give a better status than frequencies.

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