

Review of: "Arthritis in East Africa: An Observational Study"

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Potential competing interests: No potential competing interests to declare.

Dear Editor,

Thank you for giving me the opportunity to review this study.

The study was performed in East Africa, which is very intriguing. Here are my opinions regarding this paper:

1. From the introduction, the authors emphasized the problem of burden in musculoskeletal (MSK) disease in East Africa. The limitation of health care resources, funding, doctors and other medical personnel, low infrastructure, the education of the local population, social belief, and herbal usage. These factors all impact healthcare management. Also, the delay or lack of treatment affects the prognosis and outcome. The burden of insufficient treatment, including deformities, organ insufficiency, or mortality.
2. The duration of the study (4 weeks) might be too short to represent the problem in the area. The five locations might not be sufficient to demonstrate the population.
3. The mechanical burden from physical exertion and childbearing, obesity, urbanization, metabolic syndrome, and increased alcohol consumption aggravates the degenerative disease. Obesity, urbanization, metabolic syndrome, and increased alcohol consumption aggravate crystal-induced arthritis (i.e. gouty arthritis). I agree with the consequence that the authors mention.
4. High HIV, TB, and brucellosis infections still cause the problem in the area. The inadequate treatment results in complications.
5. The prevalence of inflammatory arthritis such as rheumatoid arthritis might be underestimated due to the lack of awareness and the absence of confirmatory investigation.
6. There might be confounding factors in the prevalence of systemic lupus erythematosus. SLE is a disease with high prevalence and severity in African patients. However, SLE is a multisystem disease. The patients might present in several manifestations and can be diagnosed in other subspecialty clinics (i.e. nephrology, hematology). Then the number of SLE in rheumatology clinics might be misled.