Review of: "How Competent are Health Professionals in Delivering Nutrition Education? A Cross-Sectional Study in Ebonyi State, Nigeria"

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Overall the topic is good and touching an important point in providing healthcare service. However, the manuscript has several weak points that necessitate major revision or rejection of publication in the current status.

It seems that the authors lack much knowledge and experience regarding basic analysis and interpreting the results. I will post my comments in the order of the manuscript.

Materials and Methods: Study setting. It is not clear if the selected three facilities are public or private. This should be clarified and justified why the selection did not include both types of health facilities. This could create a bias in the conclusion of the study results since the service provided in the private sector might be of better level than the public or vice versa. Moreover, how they used proportional allocation technique and RIM just represented 1.2% of the studied sample. Authors should justify why they selected this very small health facility to be included in the study since their representation is negligible compared to the other two facilities.

Sample Size: Although the sample mentioned was 421, all the tables shows the number of participants as 419 without any explanation about this missed two people and why they are missed.

Study Instrument and Data Collection: The authors did not mention the following: how many questions in each section of the questionnaire. Were the questions in all sections standardized questions as section A or created? Was the general nutrition knowledge questionnaire validated in Nigeria? How the data was collected?

Data Management: The authors mentioned "*Continuous variables were summarised using means and standard deviations.*" The tables did not show single mean for any continuous variable.

 The authors also mentioned "*The Chi-square test of statistical significance was used to compare the difference in proportions between two categorical variables.*" The tables just show simple frequencies and in the entire manuscript there is no single comparison between any variables!! The authors should highlight where was this test used!!

The authors also mentioned "*Variables with a p value <0.2 after bivariate analysis were included in the logistic regression model to determine the predictors of the outcome variable.*" I wonder where is any bivariate analysis showed in the manuscript and they selected those with a p-value <0.2! In addition, what is the outcome variable, how do they defined it,

and how it was scored in the regression model?

Moreover, there is no comparison between the health facilities to show if physicians or nurses or any healthcare professional showed the same level of nutrition knowledge in all health facilities. This is an important comparison to understand if the current level of knowledge among healthcare facilities is equal in big hospitals as small ones or there is any differences.

Results: This section is very poor as five out of six tables just show frequencies of different variables!! There is no comparisons or associations that can enrich the manuscript and give the reader more depth regarding the study results. For me the results section, which is the core of the manuscript, did not provide me much of information.

Moreover, table 5 should be deleted and this simple information could be mentioned in just one sentence in the results section.

In addition, table six has many points to highlight: 1. the name of the dependent variable should be "Adequate" and "Inadequate" as mentioned in table 5 rather than using new names of the variable. 2. where is the reference group in each variable? 3. Where is the label of AOR in the table columns? 4. How the gender variable has no 95% CI? 5. How the marital status presented as two categories only different from that in table 1, were recoding took place for this variable? why the recoding was not mentioned? 6. why the marital status, like gender, has no 95% CI? 7. what is NA in the place of AOR in the gender and marital status? what is this huge value? 8. what is this huge value for AOR for the dentist group (5016046273)??? I trust that the analysis is not correct!!

Discussion: Honestly, this very poor level of results did not encourage me to read the discussion! If we have this level of results, what we are going to discuss!!

Limitations of the Study: The authors mentioned "*The data from the health facility-based study may not be representative of the locality, as individuals with diet-related chronic diseases who did not visit those facilities were excluded.*" What is the meaning of this sentence, and why these patients were excluded? and if the authors know that and the objective of the study is to examine the nutrition competency of the healthcare providers, so why they selected those facilities???

Moreover, the authors did not refer to generalizability of the results. Could these poor results be generalized to all healthcare professionals in their location?

Based on the aforementioned comments, I do not recommend accepting this manuscript for publication in the current status. Major revision and lots of justifications should be included before considering it for re-evaluation.

Thank you.