

Review of: "Demographic and Clinical Characteristics of Refugee Children Utilizing Healthcare Services of Türkiye (2021-2022): A Single-Centre Study"

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Potential competing interests: No potential competing interests to declare.

Demographic and Clinical Characteristics of Refugee Children Utilizing Healthcare Services of Türkiye (2021-2022): A Single-Centre Study

1. Are the objectives and rationale of the study clearly stated?

The objective "to describe the healthcare utilization patterns of the pediatric refugee population admitted to the emergency, outpatient, and inpatient services" has been answered. But the rationale …"to help understand the obstacles and identify any gaps in the care of refugee children" has not been addressed. There are no data to support this.

- 2. Is the application/theory/method/study reported in sufficient detail to allow for its replicability and/or reproducibility? Yes
- 3. Are the statistical analyses, controls, sampling mechanism, and statistical reporting (p-values, CIs, effect sizes) appropriate and well described? Yes
- 4. Are the existing tables and/or figures complete and acceptable for publication?
- a. Table 2. Most common presenting conditions of refugee children by age at each admission to the emergency department and outpatient clinics

This table should include the inpatient admissions who consulted at the ED.

b. Table 3. Comparison of Hg, MCV, ferritin, vitamin B12, and vitamin D levels on routine general examination by age groups in outpatient clinics

Please include the normal values of each laboratory parameter by age group.

- c. Figure 1 may not be necessary as data are adequately presented in Table 3.
- 5. Are the interpretation of results and study conclusions supported by data?

"4383 refugee children, including emergency (81.9%), outpatient (15.1%), and inpatient clinics (3%), were analyzed."

Comment: The 128 patients admitted to the inpatient service must have been seen at the ED first. Thus, logically, the 128 patients must be categorized initially as ED admissions.



If first seen at ED and then sent to IS, they are reported as IS admissions. Is there double reporting of cases?

- 6. Have the authors clearly emphasized the strengths of their study/theory/methods/argument? Yes
- a. There is little data available on the health status of these pediatric refugees.
- b. This is the first study of Covid-19 prevalence among refugee children admitted to the pediatric emergency in one year.
- c. Healthcare services are the same for refugees as for the Turkish population. But are consultations by the Turkish population the same as those for refugees? Knowing the difference in the consultations will make this study more relevant. This comparison will make this study more relevant.
- 7. Have the authors clearly stated the limitations of their study/ theory/ methods/ argument?
- a. "The present study was limited to a local region of Istanbul. However, our study has a large sample size from a single facility over a period of one year. This study did not quantify the effects of elements such as parental socioeconomic status, educational level, and income in relation to ED utilization, since hospital medical records lacked this data."
- 8. Is the manuscript's structure, flow, or writing acceptable for publication? (subheadings, shortening of text, organization of sections, moving details from one section to another)
- a. Manuscript structure and flow are logical.
- b. The Discussion may be shortened. Suggest that the study findings be presented before the comparisons with other studies.
- 9. Could the manuscript benefit from language editing? Quite well written.
- 10. Key Points
- a. For this key point: "Many hospitals are not adequately prepared for providing urgent and emergency care to refugee children and young people." There are no data presented that refer to this statement.

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