

Review of: "Substance use disorder and associated factors at an opioid de-addiction clinic in Western Kenya"

Arpan Dharia¹

¹ State University of New York at Buffalo

Potential competing interests: No potential competing interests to declare.

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Journal Review for Qeios

Abstract

Background:

1. JOOTRH should go directly after Jaramogi Oginga Odinga Teaching and Referral Hospital's.
2. "However, little is known about the factors linked to substance use disorders and the substances used by clinic patients." I suggest MAT patients instead of clinic patients.

Conclusions:

1. Conclusions should be on the next line.

Manuscript

Background:

1. "Property destruction, poor social relationships, violence, risky sexual behaviour, and deviancy are some of the major areas of concern identified in victims of substance use disorders." I suggest people with substance use disorder instead of victims.
2. "These social vices endanger families and communities." Social vice is not an accurate description. What may have started as a social vice has transformed into a disorder. I suggest substance use disorder or drug addiction.
3. "According to a report released by the United Nations Office on Drugs and Crime (UNODC), it is estimated that between 3.5 and 7.0 percent of the world population aged 15-64, had used an illicit drug at least once in 2012." This data is from over a decade ago. Please refer to more recent data.
4. "According to a study on the global prevalence of opioid use, there are approximately 15.5 million opioid-dependent people worldwide." This data is from over a decade ago. Please refer to more recent data.
5. "It was implemented as part of policy initiatives aimed at preventing Human Immunodeficiency Virus (HIV) infection

among substance users.” Please use appropriate language, i.e., people with substance use disorder. Substance user is an inappropriate label of an individual or patient. Furthermore, HIV does not require defining.

6. “The methadone programme in Kenya is funded by the United States President's Emergency Plan for AIDS Relief (PEPFAR) and the United States Agency for International Development (USAID), with implementation assistance provided by the University of Maryland (USA) and the United Nations Office on Drugs and Crime (UNODC)”. PEPFAR and USAID are only used once; abbreviation not required. UNODC is already defined earlier.

Methods:

1. 2.1. “Participants in the study were taken through a consent explanation form, and only those who agreed to participate in the study were asked to sign the consent form and then invited for a face-to-face interview.” Is the interview part of this study? If not, consider removing.
2. 2.2. “This was a descriptive cross-sectional study that included a survey of all patients who visited the medication-assisted therapy clinic at JOOTRH between November 2018 and May 2019.” Please abbreviate medication-assisted therapy to MAT. Please ensure to define at its very use in the introduction. Also, please maintain consistency between MAT clinic versus methadone clinic.
3. 2.3. “The questionnaire was divided into four sections: participants' socio-demographic data, information on opiate use, information on medication-assisted therapy, and factors influencing substance abuse use.” Again, please use MAT and substance use disorder.
4. 2.3. “A pilot with 8 participants (PEER educators; recovering addicts tasked with recruiting members into the methadone programme) was conducted to test the appropriateness of the questions.” If PEER is not an acronym, please use lower-case. Addict is a label. Please use appropriate language, i.e., recovering people with substance use disorder, people with lived experience, etc.
5. How were patients selected for the study? What was the recruitment process?

Results:

1. “The demographic characteristics of patients presenting to the opioid de-addiction clinic at the Jaramogi Oginga Odinga Teaching and Referral Hospital in Western Kenya are summarized in Table 1.” Please use MAT clinic for consistency.
2. Table 2. Please add a column for totals. Also, the table does not display frequency so the title should be revised, as well as the description before the table.

Discussion:

1. What is an informal settlement?
2. “The nuclear family plays a significant role in methadone adherence and programme retention.” This is an interesting statement. Please elaborate or provide references of similar sentiments in other studies.
3. “Excessive spending may likely be to blame for participants' poor relationship with their parents/spouse, run-ins with the police (as a result of their involvement in crime), and the resulting financial difficulties (s).” Please delete (s).

Overall, the manuscript requires major revision before consideration for publication. Referring to patients/participants as addicts is inappropriate. They should be referred to people who inject drugs, people who use drugs, or people with substance use disorder. Furthermore, there are lots of inconsistencies in the written language, especially when referring to the substance use treatment clinic. My suggestion is to use MAT clinic every time. The methods require more information about the participant recruitment process, including participant compensation. Were participants compensated for their time? The discussion is interesting and touches on some relevant points. However, some sentences are unnecessarily long and could be shortened by simply rephrasing. For example, instead of saying “substances of abuse”, a suggestion is “illicit drugs”. Refining the writing will improve the flow and therefore permit a better understanding of the manuscript overall. If the manuscript is considered for re-review, please add line numbers.