# Review of: "Giardia lamblia infection And Associated Risk Factors Among Patients Who Are Seeking Stool Examination At Bule Hora University Teaching Hospital, West Guji Zone, Ethiopia"

Ebo Budu-Amoako

Potential competing interests: No potential competing interests to declare.

### General Comments

The study seems to be an interesting contribution to the prevalence and risk factors associated with Giardia lamblia infection in humans in the West Guji Zone, Ethiopia. Although the sample size (n=137) was not large enough, the results provide valuable data about the study.

However, after carefully reading the manuscript, my recommendation is “Major revision.”

Furthermore, in revising the manuscript, it might be useful for the auditor(s) to solicit some help in the linguistics area.

### Title

Although the study samples were selected from a specific health facility, the study population (a random sampling of stool samples representing study participants) belongs to the region served by the facility, and the results should reflect the population of this region. Therefore, the title of this paper should not only focus on patients seeking stool examination at this facility but on the general population of the region (West Guji Zone, Ethiopia).

### Introduction

If you are referring to parasitic infections, you may want to reconsider the statement in your introduction indicating that *Giardia lamblia* is the most prevalent intestinal infection in the world. While this may be true for intestinal protozoan parasites, it is not the case for intestinal parasitic infections (IPIs) in general. For example, *A. lumbricoides* infects 1.5 billion people worldwide, resulting in an annual morbidity rate of 335 million and 60,000 associated mortalities (El-Sherbini GT, Abosdera MM. Risk factors associated with intestinal parasitic infections among children. *J Egypt Soc Parasitol*. 2013; 43(1):287-94). On the other hand, while G. lamblia is the most globally common intestinal parasitic protozoan, it only infects more than 200 million people worldwide (Pillai DR, Kain KC. Common intestinal parasites. *Curr Treat Options Infect Dis*. 2003; 5:207-17).

### Methods

- Study area and period

This section should be re-written as most of the information presented is not necessary, which makes the reading difficult. Also, locally oriented words such as “kebeles,” which are not universally understood, should be explained for the reader. My brief Google search indicated that kebeles means local government administrative units/districts.

- Sampling Procedure

This section is very limited in detail. How were the samples collected and transported? Were the samples collected under sanitary conditions? Were the samples stored before examination? How were the samples stored if that was the case?

- Data collection

I suppose the structured face-to-face interview questionnaire was used to collect information rather than results.

- Data quality control

The author(s) might want to elaborate on what they are trying to present, as the reader might not find it easy to understand the information presented.

**Results**

The results section should begin with the prevalence of*Giardia lamblia* found in the study. In the conclusion section of the abstract, the author(s) mentioned *Giardia lamblia* was seen in one-fifth of the patients seeking a stool examination. For 137 patients, this will be about 27 patients, resulting in a prevalence of 19.7%. I believe you initially had 137 patients. However, elsewhere you mentioned that data were collected from 134 patients without explanation.

**Discussion**

- I assume that the author(s) collected the fecal samples and examined them in their laboratory; however, they attributed one of the factors causing a difference between their results and some other to the many infrastructures found in healthcare facilities, such as laboratory tests, water, and medical equipment.
- Some sentences in the text in the Discussion section were incomplete.