

# Review of: "Assessing the financial impact of physician self-referral on patients and how they cope with payment in Southeast Nigeria"

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Potential competing interests: No potential competing interests to declare.

## General Comments:

This study used a survey to investigate the consequences of patients who are first-treated in a public hospital in Nigeria, and then consequently referred to a private health service. The result demonstrates financial burden for some of these patients, which could have led to some significant issues surrounding sale of household assets. This is an interesting study that highlights the significant consequences of dual practice.

Some concerns regarding the methodology of this study includes:

- It is unclear if all 407 patients went from public to private hospitals.
  - Methods section: "Only the survey respondents, who met the criterion of having visited a public hospital and then moved to a private one in the last 12 months were administered the questionnaire."
  - This should be made clearer, as within the data analysis - it seems it is the 34 (private) vs. the 393 (public).
- Only 34 patients were referred to private hospitals. Although power calculations were undertaken to ensure statistical significance, this number is quite low and might not allow homogeneous representation of all self-referral patients in Nigeria.
- Reasons for self-referral also were not captured - could there be a possibly better reason for self-referral to private service including promise of novel treatment, cosmetic procedure which otherwise would not be managed in the public settings

Some other comments include:

- Some areas of writing can be modified to be more consistent with the style of scientific literature. But this is nit-picking.

Overall this is an important study which highlights deficiencies in dual-practice and the issues of local Nigerian patients. Although the findings of this survey is fairly consistent with the literature, and also makes logical sense, it cannot draw a causative conclusion.

