

Review of: "Tobacco Smoking-Attributable Mortality in Kenya: 2012 –2021"

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Potential competing interests: No potential competing interests to declare.

The study estimates smoking-attributable mortality (SAM) in Kenya. The research is thorough and demonstrates commendable work in compiling data from various sources and applying pertinent analytical tools. The key measurements are smoking prevalence rate and smoking-attributable mortality among adults over the age of 35.

- Smoking prevalence in Kenya indicated 17.4% of men, 0.9% of women, and 9% overall as current smokers. Former smokers constituted 10.6% of men, 1.4% of women, and 5.9% overall.
- Smoking-Attributable Mortality: Out of observed deaths, 16.5% were attributed to smoking.
- They further argue that pneumonia and influenza, esophageal cancer, chronic airway obstruction, and tuberculosis were primary causes, comprising 70% of all smoking-attributable mortality (SAM), with respiratory diseases (40.5%), malignant cancers (31.4%), tuberculosis (13%), cardiovascular diseases (8.9%), and diabetes mellitus (6.1%).

Area of improvement: This study provides a point estimate for SAM. They have to construct various scenarios under various assumptions regarding the values used in the calculations to construct. Estimations of this type should normally provide a confidence interval. Their reporting of a point estimate implicitly implies the authors are assuming that their estimated SAM is precise, which is not valid.