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Peer Review

Review of: "Are Tobacco Companies in Nigeria Complying With Health Warning Label Regulations on Cigarettes and Other Tobacco Products?"

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The article "Are Tobacco Companies in Nigeria Complying With Health Warning Label Regulations on Cigarettes and Other Tobacco Products?" by Afolabi Oyapero et al. examines compliance with health warning label (HWL) regulations in Nigeria. While this is an important contribution to the field of tobacco control, the manuscript has several conceptual and analytical shortcomings that should be addressed to improve its clarity, accuracy, and policy relevance.

One significant issue is the failure to reference the WHO Framework Convention on Tobacco Control (FCTC) guidelines for implementing HWLs. These guidelines provide a critical international benchmark for assessing compliance. Without referencing them, the study does not establish whether Nigeria's HWL regulations meet these globally accepted standards or where the country stands in relation to international best practices. This omission makes it difficult to determine if observed compliance issues are due to industry non-compliance or shortcomings in the regulatory framework itself.

The article also does not clarify the legal status of Nigeria's HWL regulations, making it uncertain whether the country's framework is in full compliance with FCTC Article 11 and its implementation guidelines. Without addressing these aspects, the study does not establish whether Nigeria's laws provide a strong regulatory foundation or if policy gaps are contributing to compliance issues. More information on the specific legal provisions governing HWLs in Nigeria would improve the manuscript's contribution to understanding the country's regulatory landscape.

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The article also does not discuss Nigeria's history of FCTC ratification and compliance reporting. Under FCTC obligations, signatory countries are required to submit periodic reports detailing their progress in implementing the treaty, including Article 11. Without examining these reports, the study lacks context on whether Nigeria has demonstrated a consistent commitment to FCTC guidelines or if gaps in implementation and accountability exist. Including information on Nigeria's FCTC compliance history would provide a clearer picture of how the country has approached HWLs over time and where improvements may be needed.

Another related critical issue in the manuscript is the statement that "Nigerian regulations are not all-inclusive." The meaning of this phrase is unclear, as the article does not specify whether it refers to incomplete legal provisions, weak enforcement mechanisms, industry loopholes, or limitations in monitoring and compliance oversight. Given that tobacco control regulations can vary widely in scope, it is important that the authors clearly define what aspects of Nigerian regulations are incomplete. Without such clarification, it is impossible to assess the significance of this claim or to understand what policy improvements may be necessary.

Additionally, the manuscript does not discuss the monitoring and enforcement mechanisms for HWLs in Nigeria. Effective HWL policies require regular compliance checks, clear enforcement responsibilities, and penalties for violations. The study does not indicate which regulatory agencies are responsible for enforcement, whether routine inspections take place, or how non-compliant tobacco companies are sanctioned. Without this information, it is impossible to assess whether the observed levels of compliance are the result of strict enforcement, voluntary industry behavior, or weak regulatory oversight. The inclusion of monitoring data or insights into Nigeria's enforcement practices would greatly enhance the study's policy relevance.

The article also misinterprets the concept of plain packaging, which leads to potential confusion about Nigeria's regulatory approach. The WHO defines plain packaging as removing all branding elements, including logos, colors, and imagery, and only allowing a standardized brand name in a uniform font alongside HWLs. This measure is distinct from regular HWLs and serves to further reduce the attractiveness of tobacco products and limit their promotional appeal. However, the authors appear to redefine plain packaging in a way that differs from this established WHO definition, creating uncertainty about whether they are referring to standard HWLs or a broader set of packaging restrictions. This conceptual inconsistency weakens the paper's clarity and risks misleading

policymakers about the nature of Nigeria's tobacco control policies. A more precise definition of plain packaging, aligned with WHO guidance, is necessary to ensure accuracy.

Another important methodological concern in the study is the fairly low interexaminer reliability reported in the results. This raises questions about whether the variability stems from failures in coding guidelines, inadequate examiner training, or inherent challenges in coding complex HWL compliance details. If the issue is related to unclear or insufficient coding guidelines, the authors should revise their methodology to ensure that criteria for assessing compliance are well-defined and consistently applied. If the low reliability is due to insufficient training, it suggests a need for better calibration between examiners before data collection. Alternatively, if HWL coding is inherently challenging due to the difficulty of interpreting small design elements on packaging, then this limitation should be acknowledged, and potential solutions—such as cross-validation with multiple independent raters—should be discussed. Addressing the interexaminer reliability issue is crucial to ensuring the credibility and replicability of the findings.

In summary, while the article raises an important issue regarding tobacco industry compliance with HWLs in Nigeria, several critical revisions are needed to strengthen its analytical depth and policy impact. The authors should reference FCTC guidelines on HWLs to provide an appropriate international benchmark, correct the misinterpretation of plain packaging to align with WHO standards, clarify the legal status of Nigeria's HWL regulations, and provide a clearer definition of what "not all-inclusive regulations" means. Additionally, the study should include information on Nigeria's FCTC ratification and reporting history, as well as an assessment of HWL monitoring and enforcement mechanisms. The low level of interexaminer reliability should also be addressed.

Declarations

Potential competing interests: No potential competing interests to declare.