



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2014_IJTDH_9362
Title of the Manuscript:	The study of social profile and some health problems associated with body weight disorders in upper Egypt male youth
Type of the Article	

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	Introduction - The authors take great care in presenting health problems and health risks associated with obesity. Since social class is one of their key concepts, the authors should take equal care in discussing associations of social class (or inequality in general), obesity, and related health problems. In this domain, a vast number of publications exist. Methodology - Please describe how body weight and body height were measured (materials & procedures). - Please describe how social class has been assessed and how subjects were assigned to social classes (low, medium, high). Readers should be able to get a clear understanding of the characteristics that constitute social class categories, i.e. income, social status, education etc. - Please describe how “family history of obesity” has been assessed and measured. - The term “weight problems” (page 3, line 18 approximately) is undefined. What do the authors mean by that? Please explain. - Why was the sample calculation entirely based on people “having weight problems”? Why was the expected prevalence of DM and hypertension not taken into account? Why was the expected frequency for people “having weight problems” set to 50%? Please explain. - Since the study claims to have used systematic	



SDI Review Form 1.6

	random sampling, there is no need to report the design effect. The respective sentence (page 3) should be deleted. • In general: Be more consistent and precise with your concepts. Results • The paper (page 4) states that 49 subjects were overweight and 31 subjects were obese. Looking at Table 1, I find that the authors report a total of 84 subjects to be obese. Please explain. • Since the authors intended to compare the prevalence of obesity across governorates, Table 1 is inappropriate since the others relate the frequency of obesity in the governorates to the total number of subjects and not to the number of subjects in the respective governorates. For example, the authors report 4% of subjects from Al Bahr Alahmar to be obese (20/500). However, 40% (20/50) of all subjects coming from Al Bahr Alahmar are obese, 15% (30/200) of those from Luxor and 13.6% (34/250) of those from Qena. Moreover, these percentages are clearly different across governorates (Pearson $\chi^2(2) = 21.5$, $Pr = 0.000$). • Table 2 also reports a total of 31 subjects in the obese category. Please explain why the 84 subjects from Table 1 have dramatically decreased (page 4/5). • Table 2 (page 4): Chi2-Test for DM and hypertension is inappropriate since the expected cell frequency of diverse cells is below 5. The usual procedure here would be to use Fisher's Exact Test instead of the Chi2-Test. • Table 2 (page 4): In general, I was unable to reproduce the results of the statistical tests (see statistical appendix). Furthermore, I have not the	
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	slightest idea how the authors can report 9 degrees of freedom for a 3 x 4 chi²-Test (social class x BMI group). Up to my mathematical knowledge and in accordance with what my statistical package produced, there are 6 degrees of freedom ($df = (k-1)*(j-1) = (3-1)*(4-1)!$ Could the authors please comment on this? - On page 5 the paper states: "It is noted that 3.2% and 6.5% of obese persons were significantly diabetics and hypertensive, respectively, as compared to lesser percentages of normal weight individuals (...)". In this context, it may also be of particular interest to report that 10.5% in the UNDERWEIGHT group (2/19) had DM! - In general, there is not much use in reporting DM and hypertension at all since the number of subjects is extremely small (see also comment on sample calculation). Discussion - Needs to be reviewed once appropriate results have been obtained.	
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		

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