



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_31479
Title of the Manuscript:	Effect of a cognitive-behavioral program on adherence to the antihypertensive therapeutic regimen in older adults: a quasi-experimental study
Type of the Article	Original Research 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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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)
<u>Compulsory</u> REVISION comments	This article isn't suitable to scientific standards required, mostly concerning the experimental domain. Some concerns: This article presents several unclear points: there are serious methodological lack concerning the whole study, especially about the sample's selection, experimental design and procedures. The exclusion criteria reported should be more specific. <u>Abstract:</u> The article is not well summarized in the abstract; the latter doesn't adequately report the descriptive analysis and the study design. <u>Introduction:</u> • It appears vague and not focused on the real aim of the study. • Previous studies concerning this argument aren't reported. • The presentation of cognitive-behavior therapy is brief and little clear; moreover in the study it's not mentioned how this therapy is conducted. <u>Methodology:</u> • Sample description, descriptive statistics and exclusion criteria are missing (comorbidities were not considered).	The study design is quasi-experimental study from Social Sciences methodology. In this design the groups were formed naturally (not randomized) and there is not a control group, it is a comparison group. Corrected Corrected It is naturally. Only was randomized what older house were in intervention group and what in comparison group (house not individuals). Corrected



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	• The modality of sample's constitution is unclear ("randomized" or "naturally"?) • It is not reported how the sociodemographic variables have been quantified. • What are the independent variables? The paragraph "independent variable" is unclear. • Pharmacological treatment for hypertension and CBT application are not explained. <u>Results and discussion:</u> • Table 1 doesn't report any variables. • "This shows that both groups are comparable and there are not differences between them for categorical and quantitative sociodemographic variables" (lines 264-266). Why these results are not statistically described? <u>Conclusion:</u> It appears superficial and devoid of references to previous studies. <u>References:</u> • References are insufficient. Some studies are mentioned (i.e. Peck and Erikson line 25, "It is known..." line 60, STATA 13.0 line 241) but without any bibliographic reference. • Almost all references are in Spanish language, it would be better if the references will be taken from international studies (not only from web site). • The dates of some studies are omitted (i.e. lines 80-81). <u>Other comments:</u> • The article is written in an unclear English. • International criteria established for the arterial hypertension diagnosis and related	The study is on adherence not on effectiveness of drugs. The patients had different schemes of treatment, different services of health) The table 1 is complete. I do not know why the reviewers cannot see the data in the table) Corrected We add two international references The manuscript was reviewed for a native-speaker English. We used the Official Mexican Norm for diagnosis of Hypertension. It is based in international criteria. Corrected
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	- pharmacological therapies are omitted. - Text formatting problems. - Some acronyms aren't explicitly explained (i.e. "BMG" in abstract, "SAH" line 129, "CG" line 300, "SAD" line 332).	
<u>Minor</u> REVISION comments		Thanks for your time to review the manuscript
<u>Optional/General</u> comments		