



SDI Review Form 1.6

Journal Name:	Journal of Advances in Medical and Pharmaceutical Sciences
Manuscript Number:	2014_JAMPS_14216
Title of the Manuscript:	The efficacy of intravenous immunoglobulin in the treatment of patients with acute disseminated encephalomyelitis
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 <i>(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)</i>
<u>Compulsory</u> REVISION comments	Acute disseminated encephalomyelitis (ADEM) is a disease that is characterized by an inflammatory reaction and demyelination in the central nervous system. In this study, the authors aim to explore the therapeutic efficacy of intravenous immunoglobulin (IVIG) between groups. The major concern is Kurtzke -Expanded Disability Status Score (EDSS) scale was the only parameter to assess the therapeutic efficacy. How about the clinical change of strength in paretic extremities, muscle tone, expressed static and dynamic ataxia, urination function after treatment? Or include other parameters as end points to evaluate, such as behavior, cognitive, laboratory, and image changes after treatment. This manuscript is incomplete due to lack of section of Discussion.	
<u>Minor</u> REVISION comments	1. Line 15, intravenous "imssmunoglobulin", type error. 2. Line 42, Indicate what kind of symptoms. 3. Line 89-90, Why you mix IVIG and normal saline for treatment? Why do not administer IVIG directly? 4. Line 93, How about the therapeutic regimens	



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	of control group? Did the patients of IVIG group or control group receive any medication prior to this study? 5. Line 186-223, case description is redundancy. 6. May use a table to show the demographic data between groups is similar. 7. In the Discussion, I would like to suggest the authors discuss the beneficial effects of IVIG on possible immunopathology by modulating inflammatory mediators, cytokines and chemokines, or autoantibodies in blood and CSF participate in the evolvement of inflammatory or antibodies reactions. 8. Is there any enrolled patient progress to multiple sclerosis finally?	
<u>Optional/General</u> comments		

Reviewer Details:

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