



SDI Review Form 1.6

Journal Name:	Asian Hematology Research Journal
Manuscript Number:	Ms_AHRJ_40214
Title of the Manuscript:	Clinical and Biologic outcomes following the administration of Hydroxyurea to homozygote sickle cell patients in two health facilities of Yaounde.
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:

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

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	1. The whole draft need to be re-structured according to the AHRJ's requirement. For example, you need start the article with an Abstract, instead of a Summary. 2. There are many irreverent/misplaced content need to be removed/relocated. For example, the first sentence of the Summary: "Sickle cell diseases is a hemoglobinopathy due to the substitution in the 5 beta globin chain of hydrophilic glutamic acid by hydrophobic valin thus leading to the modification of the electrophoretic properties of hemoglobin." Has nothing to do with the content, and thus need to be removed. The Summary section also contains too much details of the result, which should be relocated to the Result section. 3. The English writing need to be improved to publication quality. There are many typos and grammar in the current draft. E.g. "In this study we had as objectives to determine the clinical and biologic responses..." The existence of those errors inhibits the reviewer to understand the whole paper. 4. You need to nominate your presentation items (Figure or Tables) in your context (majorly the Result and the Discussion section) to discuss them.	1. We did our best to follow the requirements. All structured corrections requested have been done. 2. We have done our best and removed all irreverent content. We hope the corrections will be up to your expectations. 3. The original of this work was in the French language. We have done our best for the English version. Amendments have been done. We hope this amended write up meets your expectations 4.
<u>Minor</u> REVISION comments	Minor revision comments are not helpful for the current draft, as so many things need to be changed before we do anything in details.	
<u>Optional/General</u> comments	The data would be quite useful/helpful is they are presented in a more clear manner, as they are clinical data. With that being said, I still cannot see the reasoning why the patient's procession information being included (i.e. in Tableau II)	We think that information on patients (profession,educational level, income) is important for a better interpretation of outcome of HU treatment.E.g. does the outcome of HU treatment vary with any of the above mentioned patient information?. Honestly, we think these variables are important.