



**SDI Review Form 1.6**

Journal Name:	<a href="#">Asian Journal of Biochemistry, Genetics and Molecular Biology</a>
Manuscript Number:	<b>Ms_AJBGMB_42612</b>
Title of the Manuscript:	<b>EVALUATION OF SALIVA FOR MONITORING RENAL FUNCTION IN HAEMODIALYSIS PATIENTS AT UNIVERSITY OF PORT HARCOURT TEACHING HOSPITAL</b>
Type of the Article	<b>Original Research Article</b>

**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**

	<b>Reviewer's comment</b>	<b>Author's comment</b> (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)
<b>Compulsory</b> REVISION comments	<p>Why was only urea measured and not also creatinine?</p> <p>How was the influence of food (meat) excluded)?</p> <p>Please explain why the level of urea in the blood and saliva post-dialysis are the same which is not the case pre-dialysis.</p> <p>The method of measurement and validation of urea in the saliva should be mentioned in the manuscript.</p> <p>The in- and exclusion criteria and the mode of hemodialyses, filters etc should be mentioned in the method part, also.</p>	<p>I still intend to conduct a study to evaluate creatinine in saliva soon</p> <p>The patients were made to rinse their mouth with distilled water before they were asked to spit into the container. Again, the salivary specimen was spun and the supernatant was used for the laboratory analysis</p> <p>Both in the pre-dialysis and in the control groups, the concentrations of urea were very close to the levels in blood. The reason could be that saliva diffuses easily across the membrane because of its small molecular weight (Nagarathinam <i>et al</i>, 2017)</p>
<b>Minor</b> REVISION comments	<p>What is the clinical relevance of measuring urea in saliva in haemodialysis patients, if blood samples for measuring are easy to receive.</p>	<p>Blood collection is not always an easy procedure because some level of professionalism is required and complications may arise. Notwithstanding, blood collection may be associated with some physical and psychological trauma. Injection complications have been observed in certain patients, therefore adopting a non-invasive will be appropriate for patient's compliance. One of the clinical presentations of kidney failure is anaemia, so embarking on regular invasive procedures (venepuncture) that will result in continual blood loss will not be an appropriate step in the management of the disease.</p>
<b>Optional/General</b> comments	<p>Nice trial</p>	