



SDI Review Form 1.6

Journal Name:	Asian Journal of Medical Principles and Clinical Practice
Manuscript Number:	Ms_AJMPCP_44948
Title of the Manuscript:	Implementation of Mobile phone Reminder System to Improve Immunisation Uptake in Abakaliki, Southeast, Nigeria: Its feasibility and acceptability
Type of the Article	Original

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)
Compulsory REVISION comments	<p>I suggest that this manuscript undergoes major revision taking into consideration the following concerns:</p> <p>The study design adopted by authors in this study is quite confusing and problematic. The inference drawn from this study might not be communicating any significant information.</p> <p>Authors sought to compare the immunisation uptake or compliance between two groups of participants; one group at Mile-Four Hospital and the other at St. Vincent hospital both facilities in a rural setting. Mile-Four Hospital was assigned the intervention group while St. Vincent hospital was made the control group.</p> <p>“Caregivers in the intervention group received mobile phone calls 48-24 hours before the appointment date reminding them to bring their children for scheduled immunisations in Mile-Four at that given date. Caregiver-child pair was followed up till the final scheduled immunisation visit for each child. The intervention lasted for 3 months”.</p> <p>Authors did not describe what happened to the control group. Whether similar phone call reminders were given to the control group or not. So it is difficult to understand the comparison being made by the between the two groups.</p> <p>Making inferences by comparing the immunisation uptake during 6th, 10th and 14th week of the study period is difficult to understand what is being communicated because like I mentioned earlier, there was no information whether similar calls were placed for the control group or not.</p> <p>The analysis done by the authors is inadequate. It gave scanty information about the entire study. Authors limited their analysis to just the attitude of participants towards willingness to record and receive reminders and compliance rate. More information could have been given if authors had explored to find out what other factors (eg, age, marital, educational, and employment status as well as religion) could be associated with compliance and non-compliance. This would have certainly be informative and enriched your discussion.</p> <p>The discussion section lacked so many information because there was very little to discuss from the scanty results.</p>	
Minor REVISION comments		
Optional/General comments	<p>The health care delivery systems in Sub-Saharan African countries is saddled with myriads of challenges such that innovative ways would have to be adopted to achieving significant improvement in service delivery. The current work by the authors is therefore important to determining whether the use of modern technology such as mobile phone telephony could be explored to improving one of the significant health outcomes such as immunisation compliance.</p>	



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PART 2:

	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>
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

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