



SDI Review Form 1.6

Journal Name:	<u>British Journal of Medicine and Medical Research</u>
Manuscript Number:	2014_BJMMR_11602
Title of the Manuscript:	SICKLE CELL DISEASE IN PREGNANCY: MATERNAL AND FETAL OUTCOME IN PORT HARCOURT, NIGERIA
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	1. Abstract: Conclusion does not seem to arise from the findings from the study. 2. INTRODUCTION: a. Lines 54 – 55: provide reference(s). b. Lines 59 – 60: Statement hanging. In which of the subjects will the result be relevant. c. The entire introduction needs to be rearranged..... first provide a basic background of sickle cell disease. Then discuss the various haplotypes and zero into the prevalent haplotype in Nigeria. Then you can discuss briefly the study. Also try to distinguish between sickle cell disease (SCD) from sickle cell anaemia so that readers can understand that HbSC is a variety of SCD. MATERIAL & METHODS: A. Study design: change to retrospective observational study. B. What instrument (statistical) was used. C. Provide the level of significance used. D. what instrument was used to extract the data. E. Provide case definitions for malaria, vaso – occlusive crisis, haemolytic crisis, pre-eclampsia, eclampsia. DISCUSSION: A. Lines 141 – 146: Are there any relationships between pre- eclampsia/eclampsia with SCD	



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	in pregnancy. If so link it up in your discussion so that it can flow properly. B. Does SCA increase the likelihood of occurrence of eclampsia in pregnancy. Otherwise, could the mothers that died of eclampsia in pregnancy have demised following the normal pathogenesis of eclampsia just like in every other pregnant woman in which it could occur.	
<u>Minor</u> REVISION comments	References: Inconsistent style. See numbers 5,7 , 14, 15 etc	
<u>Optional/General</u> comments	1 Aim: is incomplete.	

Reviewer Details:

Name:	Anonymous
Department, University & Country	Nigeria