Journal Name:	Current Journal of Applied Science and Technology
Manuscript Number:	**Ms_CJAST_42516**
Title of the Manuscript:	**Resilience of the Caregivers Attending to Alzheimer's Patients**
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)

SDI Review Form 1.6

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	***Introduction*** The introduction is poorly written and is aimed at an audience at best of high school age not experienced dementia investigators. The references are worrisome, incomplete and do not correspond to those in the reference list. How is possible to reference dementia with a 2017 citation when dementia has been around for centuries? The same comments can be applied to those of other references from NIA and ADI. Just putting names of agencies like NIA and ADI in parentheses does not constitute a reference. The definition of caregivers is shallow and doesn't reflect the vast literature about informal caregivers. Volumes of research exist about caregiver burden but the investigators have not cited one publication but use ***Alzheimer Disease International*** to support caregiver burden. This is not acceptable. The data about the prevalence of Alzheimer disease is questionable and if these facts are true they need to be referenced. There are fragmented sentences like : **89% increase deaths due to Alzheimer's between 2000 and 2014 .** All the discussion in the introduction about resilience would be more appropriate in the discussion. It is not clear why the investigator claims that it is surprising that resilience studies have not been carried out in India. Why would this be surprising since it is known that prevalence of dementia and caregiver burden investigations are rarely carried out in developing countries. I wonder if the investigator is aware of the UK based dementia research group called 10/66. **METHODS** There is no mention of how the caregivers were recruited or their age range gender relation to patient and other pertinent facts that are always included in a well-defined study. There is no mention about the dementia stages in the persons being cared for. How were these persons diagnosed for dementia for instance? The instruments used to establish the conclusions are not provided and just indicating how they are rated is no sufficient to evaluate the remaining of the paper. **RESULTS** The graphs are not presented in a publishable format and the described methodology is not sufficient to allow the evaluation of the results. From the results it is not possible to understand what resilience means in relations to the caregivers since we do not know anything about the caregivers and their stress. **CONCLUSIONS** Very strong conclusions from a study that has not provided data about the caregivers, their stress level and how it was determined. There is no indication about the stage of dementia and the relationship between the caregiver and patient.	

Minor REVISION comments		
Optional/General comments		

Reviewer Details:

Name:	***Amanda Mcrae***
Department, University & Country	***Federal University of Rio de Janeiro, Brazil***