



SDI Review Form 1.6

Journal Name:	International STD Research & Reviews
Manuscript Number:	Ms_I-SRR_26487
Title of the Manuscript:	Perception of Dysmenorrhea and its Relationship to School Activities among Senior Secondary School Students in Nnewi, 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 (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 full of scientific description of dysmenorrhea but the review of literature regarding dysmenorrhea as a public health problem or dysmenorrhea as an important problem in adolescent girls is not sufficiently dealt. Authors should mention the observations from more similar studies. Data collection: What is validity and reliability of the questionnaire? How was it developed? References: Revise all the references according to the journal's mentioned style of referencing. Ethical Issues: For underage students the consent has to be acquired from legal guardian or parents. Firstly I would like to congratulate the authors for selecting such an important topic for research. The manuscript shows the efforts taken by the author; however revision has to be done.	Some addition has been made at the introduction to highlight the public health importance of dysmenorrhea among adolescents The data instrument was actually pre-tested out among a similar population to ensure improved reliability. This has now been stated in the relevant section. The references have been revised in accordance with journal specification (Vancouver style) For the under-aged students, consent of their parents was actually obtained orally and this has been stated in the relevant section of the manuscript. Thank you for your complimentary remarks here
Minor REVISION comments Created by: EA Checked by: ME	Keywords: 1. Use semicolon for separating keywords. 2. Please check that your keywords are standard as per PubMed's MeSH (Medical Subject Headings) database. From: http://www.ncbi.nlm.nih.gov/MeSH. Introduction:	1. Semi-colon has been used to separate key words. 2. Adhered to standards as specified in the Version: 1.6 (07-06-2013)



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	1. 1st paragraph last sentence (37): Mention as, “after pregnancy or childbirth”. 2. 2nd Paragraph. Sentence no. 38 onwards: Is it necessary to have detailed description of types of dysmenorrhea when your study is basically testing knowledge of dysmenorrhea in lay persons? 3. 3rd Paragraph, sentence no. 54: Doesn't need to give all the details of the article here when you have mentioned in references. You can write, A research on menstrual discomfort by Titilayo et.al, observed that..... 4. 3rd Paragraph, sentence no. 57: State clearly who are these "some". 5. 3rd Paragraph, sentence no. 64: Rewrite the purpose / objective of the study with lesser clutter and fewer words. Methodology: 1. Study area: Do the readers need to know in detail about Nnewi. Why did you mention the teaching hospital and its drain area, are they relevant to your study objectives in particular. 2. Study population, 2nd sentence (81): This sentence does not give idea about exactly what author has to say. 3. Sample size determination: i. Sentence 90: This is not prospective / longitudinal study so why attrition is considered? ii. Sentence 92: For KAP (Knowledge - Attitude - Practices) type of studies the sample size seems insufficient. 4. Sampling technique: Sentence 100 - Were the schools randomly selected? Ethical Consideration: For underage students the consent has to be acquired from their legal guardian or parents.	1. This has been corrected 2. The authors wanted to ensure proper understanding of the subject matter by the readers, before moving into its KAP. However, the description of dysmenorrhea has now been curtailed a little. 3. The authors have complied with your recommendations here. 4. This has been explained further. 5. This has been re-written with lesser clutter and fewer words. 1. Details have been reduced by deleting the name of the teaching hospital and shortening the drain areas. 2. This has been better explained. 3. i. Attrition has to be considered even in cross-sectional studies because some of the questionnaires may be discarded because of non-response and poor filling. ii. The minimum sample size was derived using a scientific approach. 4. Multistage sampling method was used. In each stage, the simple random sampling method was employed to select from each group. Ethical issues have now been better addressed.
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	Results: 1. Can give mean (SD) age of menarche instead of mode. Discussion: 1. 1st paragraph- This should be mentioned in results. 2. Sentence 149. Comma should not be superscript. Recommendation : All the recommendation should be based on your direct findings only. References: Remove Dual numbering Tables: Table 3: Cannot apply chi-square if the value in any column is zero.	This has been appended in the result as well. Discussion. 1. This has been transferred to the result section. 2. This has been corrected. Recommendation. This has been ensured as much as possible. The basic recommendation is education of students, their parents and teachers to remove the ignorance about the condition. References: Dual numberings have been removed. Tables: That's right, but in each of such cases, a correction factor was applied.
<u>Optional/General</u> comments	Check the manuscript for Grammar and you can do with less clutter in the sentences. Many of the sentences are too long with "and" used multiple times, avoid it.	These have been rectified.