



SDI Review Form 1.6

Journal Name:	International Blood Research & Reviews
Manuscript Number:	Ms_IBRR_26078
Title of the Manuscript:	Behaviour Of Foetal Haemoglobin And Its Correlation To Haemoglobin A1c Levels In Sudanese Adult Insulin-Dependent Diabetes Mellitus Patients
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)
<u>Compulsory</u> REVISION comments		
<u>Minor</u> REVISION comments	Introduction: please check the punctuation and connection between phrases in all parts of introduction: E.g. "The results of the study indicated a prevalence of 3.4%[4].But recent estimates change to" "The results of the study indicated a prevalence of 3.4%[4] even recent estimates.... (REF).	We greatly appreciate the reviewer's efforts and have performed a careful editing work. We have eliminated the phrase "even recent estimates place the diabetes population at around one million – around 95% of whom have type 2 diabetes. Patients with diabetes make up around 10% of all hospital admissions in Sudan."; We extend the introduction, using recent manuscript from literature the corrections and additions highlighted in yellow colour: attach to the N-terminus of valine residue of the β-globin chain haemoglobin in red blood cells, thus the more glucose binds to red blood cell the higher is the glycosylated haemoglobin. Glycation can also occurs on the lysine residue either on the α or β chains.[8,9] HbF it glycated at lysine residues of γ-chain



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	Materials and Methods: I suggest to describe all methods of blood analysis (estimation of HbA1c, Hb F,... in one section "Blood sample collection and analysis"; Exclude the reference values or discuss it in the discussion section; For topic 2.7.2 please insert only the reference and exclude the text; Results: Please, format the table excluding vertical line and shadow; Please change figure 1 to a non 3D graphic; Draw table 2 A and B together, side by side. In my opinion is easier to read and compare the data values; Please format table 3 and 4 excluding vertical line and shadow; The same of table 2 for table 4 A and B; Please improve the quality of figure 2, both for legend and line and legends; The part around table 5 is confused. Please define what is table 5 and possible 6 or put both tables together;	because it has no β chain. Glycation of HbF is approximately one-third that of HbA.[23,24] physicians must be aware that of existence of these conditions and it is potential interference when interpreting HbA1c Materials and Methods: As suggested by the reviewer , collection of blood samples and methods analysis were describe in one section "blood sample collection and analysis"; we exclude the reference values and the details of methods , only the references were inserted. Results We re-analyzed some collected data and some table were reconstructed. We have removed the vertical line and shadow from all ables as suggested by the reviewer; We have eliminated figure 1 and add it is data to table 1; Tables 2,3,4; formatted and reconstructed ; We agree with the reviewer that the part around table 5 is confused. We are sorry for the confusion ; Table 5 show the Correlation of HbF level and the duration of insulin treatment in years in IDDM group Table 6 show the Correlation of HbF level and HbA1c t in IDDM. We have provided explanation for both tables then we put both tables together as suggested by the reviewer
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	Discussion Line 1 , please exclude the expression “to the best of our knowledge”; The discussion is an important part of manuscript. Please extend this part, using recent manuscript from literature and insert the most important findings of you study. A suggestion to writ the discussion is to begin with the main results and then, discuss each result as it appears in the results section; The study cited only 22 references, and this subject has a large number of studies in literature, mainly in Pubmed with free access Conclusion: please, be concise. Describe only the important results; There is no Appendix?	Discussion Line 1 , We have eliminated the phrase "to the best of our knowledge behaviour of Foetal Haemoglobin in Sudanese Adult Insulin-dependent Diabetes Mellitus Patients has never been addressed." ; We have also eliminated the phrase the “Our data are in agreement with these reports”; We extend the discussion, using recent manuscript from literature; We begin the discussion with the main results. Conclusion We have made all changes as suggested by the reviewer What we mast add in Appendix?
<u>Optional/General</u> comments		We highly appreciate the detailed valuable comments of the referees on our manuscript of ‘Ms_IBRR_26078’. The suggestions are quite helpful for us and we incorporate them in the revised manuscript. During the last weeks, we have referred to literatures and papers and re-analyzed the collected data and reconstructed the manuscript to improve the quality of manuscript. We hope the Reviewers will be satisfied with our responses to the ‘comments’ and the revisions for the original manuscript.