

#### SDI Review Form 1.6

Journal Name:	International Blood Research & Reviews
Manuscript Number:	Ms_IBRR_42009
Title of the Manuscript:	PREVALENCE OF GLUCOSE-6-PHOSPHATE DEHYDROGENASE DEFICIENCY AMONG NEONATES IN USMANU DANF (UDUTH), SOKOTO, NIGERIA: TOTAL ANTIOXIDANT CAPACITY AND LIPID PEROXIDATION IN G6PD DEFICIENT NEON
Type of the Article	

#### General guideline for Peer Review process:

This journal's peer review policy states that <u>NO</u> manuscript should be rejected only on the basis of '<u>lack of Novelty'</u>, 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 agree highlight that part in the mathis/her feedback here)
<u>Compulsory</u> REVISION comments	<ol> <li>The title of paper reflects two objectives. Kindly change the title to a more straightforward and focused title. Is focus on prevalence of G-6-PD among the neonates or oxidative stress biomarkers in G-6-PD deficient neonates? The title could carry both but in a clearer manner.</li> <li>In result section of abstract, results of bilirubin, TAC and MDA are presented in a confusing manner. State results for G-6-PD deficient and then for G-6-PD normal separately for easier understanding for the reader. Lines 21 and 22.</li> </ol>	
	<ol> <li>Table 2 could be put in a better way or perhaps a graphical representation will show gender distribution within both G-6-PD deficient and G-6-PD normal neonates better, showing percentage distribution of each gender in each G- 6-PD group.</li> </ol>	
	<ol> <li>Indicate the cut off values for your parameters (bilirubin, TAC and MDA). This will help to show level of increase or decrease in these parameters in the two groups</li> </ol>	
	<ol> <li>It will be good to add a few sentences in your discussion explaining why MDA level was found to be slightly higher in the G-6-PD deficient neonates compared with the G-6-PD normal and why TAC was higher in the G-6-PD normal compared with the G-6-PD deficient.</li> </ol>	
Minor REVISION comments	Choose one abbreviation for Glucose-6-Phosphate Dehydrogenase. Either G-6-PD or G6PD throughout the manuscript.	
	Do not interchange G-6-PD normal group with control group. If neonates with normal G-6-PD activity are serving as control, then kindly state that before using " control".	
	Check for grammatical errors in text. Line 37- write out RBC(red blood cells) before the abbreviation. Line 40- write out PPP (pentose phosphate pathway) before using the abbreviation in line 47 Line 53-hemolytic or haemolyzed in line 52, hyperbilirubinaemia in line 57 etc? Stick to one style of spelling. Line 62- rephrase, cerebral palsy among infants in Nigeria, not Nigeria infants. Line 76- from the mother of each neonate Line 91- of the 300 neonates, 90(30%) Line 110- table heading. Capitalize first letter of each word Line 150- this is consistent with studies by and	

### reed with reviewer, correct the manuscript and anuscript. It is mandatory that authors should write

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Optional/General comments	

## **Reviewer Details:**

Name:	Hadiza Abdullahi
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