



SDI Review Form 1.6

Journal Name:	International Journal of Biochemistry Research & Review
Manuscript Number:	Ms_IJBCRR_23044
Title of the Manuscript:	Levels of Serum Ascorbic acid in a population of North Jordan
Type of the Article	Original research Articles

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.

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	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	There are numerous grammatical errors listed at the end which must be corrected. I have added two newer references about the value of vitamin C in treating cancer. Use better reference for RDA, and note that RDA for smokers is higher. I disagree that the health conditions reduce the absorption of vitamin C. I do not believe there is evidence that they reduce absorption. They do degrade vitamin C quickly after it is absorbed. In the conclusion, I think it is worthwhile to emphasize that this article should be used to alert those who do not get enough vitamin C because their requirements are higher. PUT IN INFO FOR LINES 46 Line 9-complete method line 25- . Water line 26 - in our diet. On the other line 29 - Vitamin C, also known...ascorbate, is an line 31 - [1] and numerous other catalytic functions. Vitamin C 32 - collagen, a 33 - tissue, is the 40 - [11], and carnitine, 42 - intermembrane space 46 - reference 15 is long out of date - Please use NIH and Food and Nutrition Board reference of 2000 https://ods.od.nih.gov/factsheets/VitaminC-HealthProfessional/ In the Food and Nutrition board statement, they also recommend a higher RDA for smokers . The recommended dietary allowances for vitamin C in the	- All grammatical errors were checked and corrected. - The new ref were added to the manuscript as ref 24 and 25, the previous one were numbered 26 and 27 and the following ones were changed.... - I changed the ref for RDA with the one you provided in your comments (ref 15). - I added you suggestions in conclusion. - The samples were stored properly before proceeding with the centrifugation; I did not see it necessary to mention it. - A chromatogram including the calibration curve was added instead of the calibration curve alone since one of the referees asked to add it in the manuscript. - 127-128. I repeated the numbering for the reader to not have to go back to materials and methods, it was a reminder of the study population. - The remarks regarding age stating that children had high levels of serum aa compared with older people and that “this could be explained by the fact that as we age our body does not assimilate vitamins the same way as when we were young, this is due to the fact that metabolism slows down with age, also, older adults are more likely to take medications that prevent the absorption of certain vitamins” Your comments for these results could be



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	USA were recently revised upwards, to 90 mg/day for men and 75 mg/day for women based on pharmacokinetic data. For smokers, these recommended dietary allowances for vitamin C are increased by an additional 35 mg/day. 50 - [21]. Vitamin 51 [2], and recently reported in the Journal of Cancer Therapy [Ref Folk E, Downs TM, Ordman AR. Two Grams BID is an oral dosage of Vitamin C to reduce the risk of recurrence of superficial bladder carcinoma. J Cancer Therapy 2015; 6:169-176] and Science [Kaiser J. Vitamin C could target some common cancers. Science 2015; 350:619] to be toxic to human cancer. 59 years old, 133 of 64 - Were the samples stored properly so that vitamin C did not degrade prior to centrifugation and freezing? 87 , was obtained 88 purification. All solvents 108 - follows a linear 108 to 110 - Delete, unnecessary 112 From all 115 - calibration curve is not necessary 127-128 - redundant, already stated numbers in methods 146 - data were performed 165 - male diabetics, and 168 - female diabetics, 169 - in females with high 171 - show clearly that the maintenance of AA THIS IS AN IMPORTANT DISTINCTION, IT IS NOT ABSORPTION THAT DIFFERS, BUT MAINTENANCE. AA IS METABOLICALLY EXHAUSTED BY OXIDANT LEVELS IN UNHEALTHY INDIVIDUALS 172 - conditions do not have 180 to 184 - These remarks seem like guesses, without scientific justification. It is more likely that children eat more fruit and drink more juice, that older adults have more free	accepted, however, it was my way to explain this differences, I did not find any work supporting my suggestions. -
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	radicals exhausting vitamin C levels. It would be best to check the literature to see how vit C use and levels change with age. Check your refs 31 and 32 to see what reasons they suggest. 189 - Loria et al showed that 199 - group who smoke 201 - C concentration of 203 - less than 207 - concentration of serum vitamin C of 47.2 208 - there were no heavy 211 - serum ascorbic 212 - non-smokers. The study 215 - et al found 217 that smoking leads to depletion of vitamin C due to higher levels of free radicals generated by inhaling smoke. I KNOW OF NO EVIDENCE THAT SMOKING LOWERS VITAMIN C ABSORPTION, BUT IT DOES DEGRADE SERUM VITAMIN C 223 I WOULD ADD ones. People with diabetes, high blood pressure, smokers, and others who do get sufficient vitamin C in their diets should be made aware of the health risks resulting from inadequate intake of this important vitamin.	
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments	Paper is worthwhile, but unless grammar is corrected it is unacceptable.	