



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_21722
Title of the Manuscript:	BIOCHEMISTRY ASSESSMENT OF DOGS EXPERIMENTALLY INFECTED WITH SINGLE T. BRUCEI, A. CANINUM AND CONJUNCT T. BRUCEI AND A. CANINUM INFECTIONS AND TREATED WITH DIMINAZENE ACETURATE AND MEBENDAZOLE
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	Albumin Albumin levels are below the reference ranges (2,3 mg/dl) in all 4 Groups on day 0. Low levels of albumin are caused by losses (urine or faeces) but also by insufficient production. A poor diet can cause hypoalbuminemia. Were the dogs recruited in the study stray dogs? How they were fed before the day 0? The progressive increase in the levels of albumin (particularly in Group 1: from 1.9 to 2.6 in one week) may be subsequent to adequate food? This must be clarified Bilirubin Elevations in levels of serum bilirubin (normal range 0.1 - 0.6 mg/dL) are associated with Hepatic causes (liver damage) but also with increased red blood cells destruction (Pre-hepatic causes) or cholestasis (Post-hepatic causes) The values of bilirubin only not associated with red blood cell count, values of haemoglobin and liver enzymes can not allow to say that the cause of the its increasing is really a liver damage. Biochemistry should be therefore expanded or definitive conclusions can not be drawn. Cholesterol The cholesterol levels of the Group 1 on day zero are significantly lower than the other groups (less than half).	The significant increase in albumin in the experimental groups at week one was most probably due to improved diet and efficient food absorption. <i>Abinitio</i> the dogs were purchased from the local market and acclimatized for some weeks. Although they were well fed during this period however there was poor absorption and assimilation due to the effect of both ecto and endo parasites. These conditions were adequately treated during the period of acclimatization thus influencing the rapid increase in albumin. I completely agree with you on that. The data on significant decreases in PCV and Hb have been included in the paper to support that. Nevertheless, significant increase in total bilirubin was not the only reason for suggesting liver damage, the presence of trypanosomos in liver tissue elicits the release of inflammatory which causes varying degree of liver damage. You are right but remember science works with statistics and the level of significance. Though there was a difference in data it was not statistically significant.



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	This could affect the statistical analysis. Regarding at least cholesterol (as that the 4 Groups are not homogeneous) the comparison should be made in each group with the day 0	
<u>Minor</u> REVISION comments	The dose of mebendazole used is in this study (200 mg/kg once a day for 3 days) is much higher than the therapeutic advised dose in every veterinary reference(22 mg/kg once a day for 3). Although this does not seem to affect the results, the reader should be discouraged from using incorrect dosages. This has to be highlighted.	There was actually an error in dose presentation. The proper dose used was 100mg twice daily for 3 days. Although this is still higher than the reference dose used in Western Countries however in Nigeria, the aforementioned dose is routinely used in treatment of endoparasites in dogs without apparent clinical effect. Infact each small tablet comes as 100mg given twice daily for 3 days. Ie administered morning and night.
<u>Optional/General</u> comments	If the authors don't include more data (Haemocytometry, AST, ALT) and correctly solve the major bias the paper cannot be considered worthy of publication	There is an additional data to support the facts.