



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_18687
Title of the Manuscript:	Prevalence of leukocyturia among Schistosoma haematobium infected school children in Cameroon
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 <i>(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)</i>
<u>Compulsory</u> REVISION comments	In the Abstract: the first sentence stated "Our findings suggest that leucocyturia seems to be associated with S. haematobium infection" is not corrected because the author didn't study this aspect. The true conclusion that he could state is "Our findings suggest that the prevalence of leucocyturia was higher among the infected children". Future studies..... To talk about a potential association between leucocyturia and S. haematobium the author might compare leucocyturia among the entire 266 urine samples. If the author has examined all the sample size (n=266) for leucocyturia, he could determine the association between this morbidity indicator with S. haematobium using the Person's Chi-square test or an Odds ratio. However if the indicator has been only measured among S. haematobium infected children, the author could not concluded for any association.	We corrected the conclusion of the summary. Many infections can cause leukocyturia in child. We have not reviewed all of these infections. In this study we wanted to know whether infection with S. haematobium could be considered as a cause of leukocytes excretion in urine; that is why we have worked only in infected children.
<u>Minor</u> REVISION comments	Line 52: A reference is needed after area (Ref);	
<u>Optional/General</u> comments	An interesting article in the area of epidemiology of schistosomiasis, which could be improved if the author adds another table on the association between leucocyturia and s. haematobium. However this is only possible if he has measured this indicator on all the sample size.	