



SDI Review Form 1.6

Journal Name:	<u>International Journal of TROPICAL DISEASE & Health</u>
Manuscript Number:	Ms_IJTDH_23239
Title of the Manuscript:	Management of Tuberculosis including Drug-Resistant TB in Private Sector of Mumbai, India
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.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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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	The article touches on an essential area in TB care, which has not been extensively studied. However, the following issues should be considered to make the paper suitable for publication: 1. Actual TB management which revolves around control and treatment were silent in the introduction. Common TB management practises in India need to be also highlighted in the introduction. 2. Lines 21 and 22 which reports that majority of patients in high burden countries access treatment from the private sector is debatable. The researcher(s) should substantiate this point with relevant literature. In many TB prevalent countries, TB treatments are virtually free in the public health domain, making patronage high in such areas compared with the private domain. 3. The author(s) should seriously check grammar and sentence construction, including punctuations. There are numerous grammatical mistakes. For instance, Line 57: There is relative lack of literature related to should be rephrased. Line 151: analysis should be analyses. Line 164: Table 1 shows , not Table 1 show. The objective section of the Abstract should be completely rephrased. For example: It should read: to find out practises related to diagnosis and treatment of drug resistance TB. The paper should be sent to an expert in English to make necessary editing.	1. Text in first paragraph has been revised. Common TB management practices in India were inappropriate and not in line with recommendations/guidelines. This was already stated (Line 37-41). Six previous studies from India have been referred. 2. The statement comes from a review article published in Lancet (line 24-25). However, much has changed since then. We referred to latest global TB report which states that about a third of the estimated cases are not reported to Govt (Line 20-22). Data from Mumbai city also suggests that majority of TB patients are treated in private sector (Line 32-35). 3. Line 57 revised. Line 151 revised, now it is line 152 Line 164 revised, now it is line 186 Objective has been reframed for abstract. The study includes diagnosis and treatment of new TB cases as well. Hence that part of sentence has been retained.



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	4. Were there cases of extra pulmonary TB? Were there any MDRTB? Were there cases of Rifampicin resistance? It is more likely to experience these cases because the topic somewhat falls on drug resistance and treatment. The author(s) should make these issues clear in writing. 5. The rationale of the study is not clearly stated. The author(s) need to describe the significance of studying the topic. 6. The section on study setting (Lines 69-76) was supposed to report on the locations of the health care centres in Mumbai where TB management occurred, with a clear justification of the selected locations. However, the researcher(s) rather described practitioners under this section which should be corrected. 7. Lines 80-82 reports on study design. Approval issues mentioned in the section are misplaced. 8. The TB treatment section under the Results should be presented based on classifications by site of disease. For instance, extrapulmonary TB and pulmonary TB. Aside that, the researcher(s) need to report whether there were cases of previously treated TB, and their implications on TB management. Were there cases of death? Were there issues of treatment supporters? Management of TB cases cannot be discussed without making these issues clear. 9. The tables should be formatted well. The presentation of the chi square tests is unseen in the Table and the usage of this non-parametric test should be justified in the Materials and Methods section. Ethical issues : In Lines 144-148, the author(s) claim that ethical principles of 'Declaration of Helsinki' were followed during the study.	4. This paper is limited to management of pulmonary TB cases only. We realised that the title did not specify and now we have revised the title, abstract and added text in introduction to reflect this. 5. Rationale of the study has been revised. (Line 56-77; 70-77 have been added) 6. The section now merged with section 'selecting study participants' (Line 89-115) 7. The approval statement shifted after ethical considerations (line 167-169). 8. The paper does not include practices related to extra-pulmonary TB. Sections within results include 'new pulmonary TB', 'patients not responding to first regimen' and 'MDR-TB'. The data on deaths, treatment supporters was not collected – typically, treatment in private sector in Mumbai does not involve treatment supporters. Data on total TB deaths has been reported in introduction. 9. Tables cover multiple practices. Only those which are in ISTC standards have been compared using chi-square tests. Therefore, the presentation of test results is below the table and not within the table. Section within methods on chi square tests has been revised {Line 153-158} Ethical issues: Comment was not understood by authors. Kindly clarify if needed.
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<u>Minor</u> REVISION comments	1. Lines 85-104: Researcher (s) could provide a table displaying the study participants with their respective population size and TB cases handled, rather than merely describing them. 2. The researcher(s) need to reflect on other specific studies in the Discussion section. 3. The author(s) mentioned in their conclusion that training of physicians with respect to correct treatment practices for new TB cases are essential. The author(s) should justify using findings from the results.	1. In India, private practitioners do not cater to a fixed population. Hence such table is not introduced. 2. We felt that we have already reflected about same. 3. Sentence added - This study shows that the practices related to management of TB are deviating from the international standards for TB care (Line 413-414).
<u>Optional/General</u> comments		