



SDI Review Form 1.6

Journal Name:	<u>International Journal of TROPICAL DISEASE & Health</u>
Manuscript Number:	Ms_IJTDH_31371
Title of the Manuscript:	Seasonal prevalence of malaria, fever, anaemia and factors associated with malaria prevalence among children less than five in an area with prolonged malaria transmission in Ghana
Type of the 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	Suggestions: 1) Add Ghana to key words. 2) Check English language and punctuation. 3) How did the authors go about treatment of positive malaria cases? Did they offer radical treatment to all positive participants at the end of the study? Lines 239-240= intention to treat (?). 4) Anaemia relates to chronic malaria. Was there any relation of anaemia and parasitaemia? 5) Did all the subjects come from rural areas or some were from urban areas? Please explain. 6) Were there any co-infections with other <i>Plasmodium</i> species? 7) If there were, how was the anaemia compared with individuals without co-infections? 8) Were all febrile cases attributable to malaria? 9) The authors suggest a possible relation of food availability and anaemia (Lines 349-351); however, these interconnected health determinants require further investigation. Did the authors consider higher parasitaemia and anaemia in those subjects?	1) Done 2) Done 3) Has been addressed in line 172-173 Analysis of the primary and secondary data was carried out on an intention-to-treat basis (this implies that all children who were recruited and screened were included in the analysis) 4) This was tested by running a t-test of parasitaemia on anaemia status and the result was that anaemia status was not significantly related to any parasitaemia or high parasitaemia 5) 30 communities were randomly selected the population census. Therefore some communities (6) were from urban and the rest were rural. 6) There were no coinfections 7) Since there were no coinfections there we no need to compare anaemia in individual without coinfections. 8) Since this was a cross-sectional study our aim was to mainly to look for asymptomatic malaria and not the relationship between malaria and fever



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	10) Line 324-326: what explanation is offered for malaria prevalence to be associated with ACTs use at home? 11) Line 404 on: could it also be suggested to improve nutrition in children in general, including educating mothers on feeding requirements during illness and otherwise? 12) Revise very careful reference citing and punctuation according to journal specifications. Some examples: Reference numbers 4?,8?,10?,11?, 25? 36?etc.	9) Has been addressed as in Point 4) above 10) In this study we were looking at asymptomatic malaria but prompt treatment clears malaria thus if ACTs are used at it will reduce the malaria prevalence 11)Done 12) Done
Minor REVISION comments		
Optional/General comments		

As per the guideline of editorial office we have followed VANCOUVER reference style for our paper.

Kindly see the following link: <http://sciencedomain.org/archives/20>