



SDI Review Form 1.6

Journal Name:	<u>International Journal of TROPICAL DISEASE & Health</u>
Manuscript Number:	Ms_IJTDH_32386
Title of the Manuscript:	Bee-sting with extensive cerebral infarct; a case report.
Type of the Article	Case study

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	The authors present a clinical note reporting the case of a nine-year-old man with cerebral infarction following bee sting. This case report is potentially interesting but the manuscript can be improved according to the following minor suggestions:	Thank you.
Minor REVISION comments	1. It would be necessary to include data on laboratory results (blood count, ESR, etc.) in the case description. 2. EEG was performed? 3. Cuantifiquen la focalidad neurológica de acuerdo con la escala de NIHSS y la escala de Barthel 4. In the Discussion section, a comment better defining the relevance of the case reported should be added, with a clear remark that ischemic stroke secondary to bee-sting is rare and <i>no se observó en ningún paciente de una serie de 70 cases</i> in a clinical study of ischemic stroke of unusual cause (Eur J Neurol 2001; 8: 133-139). The inclusion and comment of this reference is recommended.	1. The details of the investigation results have been included in the manuscript (lines 47-51) 2. EEG was not performed. 3. Scoring the CVA of the patient by using the available scoring scales would have been very prudent. Unfortunately, this was not done while the patient was admitted. 4. The suggestion on the discussion is duly noted and has been included in the manuscript (lines 82-84, 134-135).
Optional/General comments		