



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_35574
Title of the Manuscript:	Oral Candida albicans in patients in the ICU of an Brazilian hospital school and in vitro susceptibility of isolated yeasts to extra-virgin coconut oil”
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	Report The paper reports isolation and identification of Candida albicans from patients and its susceptibility testing against coconut oil. The paper must address following concerns . 1. Table-1 and related text must clarify what is the actual number patients which yielded C. albicans. They give n=61 as also n=30, text gives number of isolates as 61 out of 90. 2. Table-2 and related text may also mention if it is the isolate from same patient which is susceptible to 10% oil. 3. R&D must also give significance and discuss the fact that all 13 isolates of time zero are sensitive to 25% oil while isolates of later time stages are more resistant. 4. A positive control (say with Fcz) may have been run to add value and insight into results. 5. A typical picture of plate for each set of experiment should be given.	1) Attended: table 1 was modified for better understanding. The text was revised: 30 = patients, 61 positive samples and 90 total samples of 30 patients in three times 2 e 3) The 10% coconut oil susceptible strain was isolated from the same patient at the different collection times. However at other concentrations it was evident that the susceptibility to coconut oil may suffer interference from the adaptability of the sample to the buccal microbiota and the momentary state of the patient's immune status at the time of collection. Thus, time interferes with susceptibility to the fungus, that is, over time it adapts to the situation of the oral microbiota and becomes more resistant. This was evident at 25% concentration where strains isolated at time 0 were susceptible 10 (76.9%) while most strains isolated at 72h and 96h times were resistant, requiring a concentration of 30% oil to reach Susceptibility in most strains. We put these comments in the discussion of the paper. 4) All oral isolates of Candida were obtained from patients who did not use any antifungal, polyenic or azole drugs, as verified in the medical records consulted. The researchers considered the criterion of no drug use by any patient to fungal infection. Resistance or susceptibility to conventional drugs was not studied. Therefore, we did not consider the use of Fcz (as positive control) during the experiments. 5) Photographs were made, however identification analysis of Candida species is already clearly known (germ line and chlamydospore formation and biochemical tests, auxanogram and zymogram).
Minor REVISION comments		
Optional/General comments		