



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_37916
Title of the Manuscript:	Nine Years of Malaria Cases in Bangladesh: A Time Series Analysis
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	- Revise tense of verbs in the whole document (most are overlined) - Also revise most writing style in the text (most are overlined by the reviewer) - Is abbreviations list needed? - Results section: revise (specify) some figures title: fig 4, fig 5. Include sites in each of figures 10. Revise legend in magenta (purple) in fig 5 (i.e patients ≥ 15 years) - Reference style: to be written according to the journal guidelines. Also, add year of publication of references 25, 26. Reference 19: add journal or book title. Reference 26: add more authors before et al. The manuscript highlight malaria epidemiology trend following elimination program implementation in Bangladesh. Data gathered are interesting and helpful for country decision makers.	1. We agree the reviewer comments and have revised the manuscript including correction of tense of verb. 2. We agree the reviewer comments and have been changed most of the writing style in the revised manuscript. We have changed the writing style in following sentence in introduction section P03.16-19 (Line 16-19 in page 03) in revised manuscript (underlined). <i>Malaria positivity decreased from 84,690 in 2008 to 27,737 in 2016 resulting very few cases happened in a year in low endemic areas. Now malaria infection mostly occur in rural areas which is close proximity to hard to reach areas and/or to fringe or deep forest under Chittagong Hill Tracts (CHT), and Cox's Bazar districts.</i> 3. We agree the comment and have deleted the abbreviations section. 4. Thank you for reviewer comments. We have rephrased the following figures according to the reviewer comments. a. Title of Fig 4. and Fig. 5 have been changed b. Fig. 10 which is Fig. 8 in revised manuscript has been renamed with a, b and c: a) CHT, b) Cox's Bazar and c) low endemic districts. c. Legend of Fig. 5 have been changed 4. We agree with the reviewer comments and have been rewritten reference section according to journal guideline. Total 6 persons are renamed followed by et al in any publication (if available) and also included DOI number (if available) in revised manuscript. Reference no. 25 and 19 has been deleted in revised manuscript. Reference no. 26 which is 15 in revised manuscript has been renamed with more author and also included the DOI number: Wendy Prudhomme M, J N Mangeni, R Steketee, B Greenwood. Changes in the burden of malaria in sub-Saharan Africa. The Lancet Infectious Disease. 2010;10(8):545-555 DOI: http://dx.doi.org/10.1016/S1473-3099(10)70096-7 We would like thank the reviewer for their thoughtful and in-depth comment and hope the manuscript would provide future reference for country decision making towards malaria elimination.
Minor REVISION comments		
Optional/General comments		

