



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_41783
Title of the Manuscript:	Parasitological surveys on malaria in rural Balombo (Angola) in 2007-2008: base line data for a malaria vector control project
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:

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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 group 2-9 years, contains children who were in the group of <5 years. i.e. <5 years are those aged 0-4.9 years and those age 2-9 years. The group <5 years (or 0-4.9 years) are definitely within those aged 2-9 years. and those <15 years included all other children. I tried to make a meaning out of all these but I find it difficult. The authors may wish to properly segregate the children's age in to three groups of 0-4.9, 5.0-9.9 and 10-14.9 years of age. Analysis should be based on this segregation. It is a beautiful paper but the problem I have is the age segregation.	We can understand the problem of the reader if we stick with the objective of "the assessment of the amount or degree of malaria in an area or a community" WHO, 1963. In such a case "the term "malaria survey", as used traditionally, meant an evaluation of the endemic or epidemic status of malaria in a community or an area; such a survey estimated not only the amount and the main features of malaria, but also of the underlying factors pertaining to the natural history of the disease in the community. The newer term "malariometric survey" has a more precise meaning and refers to the measurement of the amount of malaria by the use of spleen and parasite rates determined on comparatively small random samples of the population, often restricted to young age groups. These surveys assess the distribution and degree of malaria". For such a <i>purely descriptive study</i> of assessment situation 7 age groups could be considered (WHO, 1963) where we can underlined "2- 4 years = toddlers; 5-9 years = juveniles and 10-14 years= adolescents". The aim of the present study was <u>not</u> to make such a descriptive situation but to identify what could be the best "age group indicators" for the evaluation of <u>the vector control operations scheduled</u> (and actually implemented at the end of 2008). In such a case it is not possible to study these 7 age groups and a "reasonable choice" has to be made, and was done by previous workers involved in malaria vector control. The choice will depend upon epidemiological situation and operational conditions. For example for Chourasia and al (2017) in India: "Children under the age of five years and between 5–14 years old are most vulnerable to malaria infections. Malaria prevalence among these age groups and LLIN usage the previous night are among the few key indicators used to measure outcomes of malaria intervention programs". Cook et al (2018) focused on 1- 14 years old to evaluate the Vector control Program in Bioko Island while in Ghana cross sectional surveys were done among 6 to 59 months to evaluate malaria infection and the large scale vector control intervention (Afoakwa et al., 2018) Classically 3 main age groups are considered: less than 5 years old (= at risk group) ; 2- 9 years old (endemicity index) or below 15 y. which include the other one and being larger it allows a better evaluation of the output of vector control if the parasitological impact is low. Therefore we analyzed the data obtained during the two years base line cross sectional surveys and dealing with these 3 age groups to notice if they are similar and in such a case the U 15 only will be considered or if they are largely different and in such a case they will have to be analyzed specifically.
Minor REVISION comments		
Optional/General comments		