



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_42278
Title of the Manuscript:	Malaria related deaths among children with manifestations of fever symptoms on admission in a secondary health care institution in Western Region of Ghana - a retrospective study
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	Table 1: Number (instead of "frequency"); Haemoglobin; The results on malaria parasite ("seen" or "not seen") are presumably based on microscopic examination of blood smears. Please specify. What were the results according to the rapid diagnostic test? The authors should compare these two diagnostic tools. Fig. 1: Please specify that mortality here refers to mortality due to all causes (not only associated with malaria). The line connecting % mortality is not necessary. Fig. 2: Same comment, the line connecting % mortality is not necessary. Fig. 3: Same comment, the line connecting % mortality is not necessary. Fig. 4: This histogram is hard to see. A table may be better. The spelling of the drugs should be checked: antipyretics, artemether-lumefantrine, artesunate-amodiaquine, artemether. Fig. 5: A table may be more informative.	Thanks so much for your expert review and suggestion of our manuscript. Below are responses to the issues raised Corrections have been made Unfortunately, information gotten from the folders of these patients only mention the final outcome of the laboratory test for malaria (Positive for either RDT or microscopy). It did not specify if negative or positive for RDT or microscopy. So we are unable to do the comparison you requested The line represent the % mortality, removing it will remove the % mortality section of graph which is the major highlight of the figure. Done Authors think the figure conveys the information of the results better
Minor REVISION comments	Line 38: as their infection progresses Line 40: can cause Lines 92-93: Ref 20 describes the study area but does not provide any map. An addition of a map would be helpful for readers who are not familiar with Ghana. Line 99: folder numbers; Children were not 'recruited' in this retrospective study. Lines 112-114: Please provide more information on First Response. Does it use HRP2? Line 131: Please specify that body temperature refers to axillary temperature (in neighboring French-speaking countries, rectal temperature is often measured in young children). Line 171: significantly decreased Line 219: alternative first line drugs for children who cannot tolerate artesunate-amodiaquine	Done Done Map added Done Done Done Done



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	Ref 10: Available (spelling) Ref 11 and 12: Please check the format. The exact publication dates are not necessary. Ref 13: Are there authors after Ogbamariam A? Ref 14: Please complete the reference, if necessary. Ref 15: Please correct this reference. Ref 19: surveillance; Site accessed 2018. A more precise date should be provided. Ref 35: Please provide more details so that interested readers can access this report more easily. Ref 36, 37, 43: Please check the complete list of authors. Ref 38: Please complete this reference.	Done Yes, added That is how it is presented in literature. Done done done
Optional/General comments	The authors reviewed malaria-associated deaths among children admitted to a hospital between 2010 and 2012 in Ghana. Introduction is too long. About half of the text can be deleted. Materials and methods and results are clearly described. Discussion brings out some interesting observations, including cases that are not confirmed by laboratory diagnosis and non-malarial cases being treated with antimalarial drugs, which are common in many parts of the world where malaria is endemic. English needs some corrections. The authors should consistently use either British or American spelling throughout the text.	