



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_44012
Title of the Manuscript:	A Case Report of Alloimmunization With Hyperhaemolysis In A Multiple Transfused Known SCD Patient At A Tertiary Hospital South Nigeria: A Challenge in Developing Countries.
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>)

PART 1: Review Comments

	Reviewer's comment Hyperhemolysis is always a threat both for patients and doctors. In this case report the patient recovered when transfusion stopped. The authors should discuss the possible therapy with erythropoietin and eculizumab. There is a recent review, How I safely transfuse patients with sickle-cell disease and manage delayed hemolytic transfusion reactions. Pirenne F, Yazdanbakhsh K. Blood. 2018 Jun 21;131(25):2773-2781. doi: 10.1182/blood-2018-02-785964. Epub 2018 May 3. Review, that the authors should include in their manuscript.	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) There is room for immunosuppressive agent and the suggested review article has considered. Thank you.
Compulsory REVISION comments	Line 58 packed cell volume 24% Do the authors mean Ht 24% Could you please discuss why the patient received iron supplementation as he had increased ferritin from the previous transfusion? As the patient had many vasoocclusive crisis during the last 4 years, did not he receive hydroxyurea? The patient presented with intravascular haemolytic episode and low Hb and increased LDH. How many days before has he been transfused? Is LDH further increased?	The correction has been effected. The patient was given the iron supplementation because the complete blood count and peripheral blood film revealed iron deficiency with decrease MCV, MCH, MCHC, and microcytic hypochromic cells irrespective of the increased ferritin. Hydroxyurea was prescribed but the patient could not tolerate it and hence it was discontinued because of the gastrointestinal side effect. From the fifth day No
Minor REVISION comments	Line 10 common Line 15, 53, 99 HbSS Line 41 SCD	The correction has been effected.
Optional/General comments	It is interesting case report but should be rewritten	Thank you.

PART 2:

	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)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	