



SDI Review Form 1.6

Journal Name:	_Journal of Advances in Medical and Pharmaceutical Sciences
Manuscript Number:	Ms_JAMPS_24780
Title of the Manuscript:	Effect of Magnesium Sulphate on Hepatic Biomarkers in Pre-eclamptic Patients in Selected Tertiary Hospitals in Osun State South Western Nigeria
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)
<u>Compulsory</u> REVISION comments	This paper reports the effect of magnesium sulphate on hepatic biomarkers in pre-eclamptic patients in south western Nigeria. The subject number was quite small. Authors reported that no significant difference in hepatic biomarkers of pre-eclamptic women between on and not on magnesium sulphate at second and third trimesters. They concluded that magnesium sulphate exhibits safe and protective roles devoid of any adverse effects on the liver of pre-eclamptic women. There are already numerous reports from African countries, including Nigeria. This paper is not informative or contributory. There are a number of issues that need to be addressed: Major Discussion is poor in the content and incoherent. There are many papers already reported the effects of magnesium sulfate against pre-eclampsia in the developing countries. 1) Introduction The textbook-like contents are not necessary. Line 31-33 may be deleted.	We did not investigated patients from the entire south western Nigeria but selected tertiary institutions in a single state (Osun) within the entire south western Nigeria. From review of literatures, one consistence observation was that $MgSO_4$ is commonly used in pre-eclampsia majorly as seizure prophylaxis. We noticed dearth of information on it effect on complete hepatic biomarkers. And with the understanding that the liver is fundamental in drug metabolism, we aimed to know the effect of $MgSO_4$ the hepatic biomarkers. We have tried as much as possible to discuss our results in the report. Thank you sir/ma. We will like to say these lines be allow to stay, since introduction section include literature review, and information presented in these lines is germane to the topic under discussion. And also to allow for continuous



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	2) Methods The description of established methods are not necessary. (Line 75-82, Line 139-267) 3) Tables Table 2 and Table 4 may be combined. Authors should statistically analyse 3 groups (i.e. C, D and F) by ANOVA. The row of "Differences between means" should be omitted in each Table. 4) Discussion Line 335-337 It is wonder if synthesis of proteins increases especially in pre-eclamptic individuals compared to non-eclamptic individuals. References are required. Line 340 Is there difference in hepatological markers between pre-eclamptic individuals with or without seizure? Line 360 References are required to explain that magnesium sulphate works as angiotensin converting enzyme inhibitor.	flow of information. Sir/Ma, we believe removing lines 75-82, and 139-267 we definitely collapse or destroy the substance of the methodology. Allowing these lines to stay will do well to those readers who are not specialists in chemical pathology to comprehend the report. We suggest against combining tables 2 and 4, because combining the two tables will look cumbersome. The whole groups were subjected to ANOVA after which significant difference between pairs of means tested with appropriate post hoc test. So C, D and F have been factored in already. The rows have been deleted from all the tables. Please see references 22, 23 and 24. Yes according to our reference 24 Please see reference 26.
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<u>Minor</u> REVISION comments	1) Description is not consistent Ex. second and third/2nd and 3rd magnesium sulfate/ MgSO₄ 2) Line 134: 4°C should be 4°C. 3) Prothrombin Time Some abbreviation is not in common use. Ex, PROTH, 4) Tables Authors should list up Tables last part, not in Results part. 5) References Abbreviation of journal name is not consistent. Ex. Ref 20 J. <u>cli.</u> Pathol. Ref 22 J. <u>Clinical</u> Invest. 6) Reference 24. This paper is only case report. This does not explain tight junction mechanism. Title may be BJM. Page is wrong 1070-<u>1071</u>.	A close observation will confirmed that second and third and not 2nd and 3rd were used in the table headings where we think are appropriate. About "magnesium sulfate/ MgSO₄" Magnesium sulphate was used instead of MgSO₄ at the beginning of a sentence which will think is appropriate. You will agree with us that where uncommon abbreviations were used, a description was given to take care of it. What you saw us did was according to the SDI guideline. Tables are meant to be within the text. These are two different journals and their styles of abbreviation are different. These have been corrected as highlighted.
<u>Optional/General</u> comments		