



SDI Review Form 1.6

Journal Name:	<u>Journal of Advances in Medical and Pharmaceutical Sciences</u>
Manuscript Number:	Ms_JAMPS_32303
Title of the Manuscript:	EVALUATION OF EFFICACY OF CO-ARTEMISININ IN THE TREATMENT OF PLASMODIUM FALCIPARUM MALARIA IN GOMBE STATE, 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>)



SDI Review Form 1.6

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	GENERAL COMMENT : The authors provide interesting results of efficacy of several Artemisinin Combined treatments (ACT) in Nigeria. However, the manuscript needs additional data/explanations and its writing should be improved. DETAILED COMMENTS: Incomplete bibliography in introduction and discussion section—please complete bibliography with additional references of published articles; WHO guidelines are important, but do not provide obtained results and do not reflect the “state of art”. 14 references including 5 WHO and pharmacopoeia articles give only a partial vision of known data. Incomplete Material and method section : please provide a complete design of the study, place and date, inclusion (confirmation of <i>P. falciparum</i> infection?) and exclusion criteria, details of administration (quantity of water, posology of AS-SP with respect to body-weight...). Please specify how PCR correction is made (or cite a reference). Tables of results unclear : please either explain tables of result (explicit column parameters and complete legends) or give details in material and method section on parameters considered. The reader does not understand for instance in Table 1 what “percentage” is given (percentage of what?), how the “total” is calculated. The column called “Treatment days” contains number of parasites/μl of blood? AND the total is the mean, I suppose? In this case, units are missing (parasites/μl blood). The legend of Table 2 and 3 is identical, but the results are different; I suppose that Table 2 concerns unadjusted results and Table 3 PCR corrected results? Please precise the time at which results were obtained (d28?). What were you criteria for treatment efficacy?	Additional data/explanation was added and the writing also was improved by providing more detailed explanation. This has been taken care of. Materials and methods section has been improved by providing additional detail. Study design, place and date, inclusion and exclusion criteria were included in the original article and confirmation of <i>P. falciparum</i> was done by microscopy. Water used is Faro table water. The percentage is indicating percentage of parasite clearance of the drugs used. The total is indicating the percentage of parasite clearance by the antimalarial drugs used. Table 2 is representing uncorrected PCR adjustment while table 3 is representing corrected PCR adjustment. The time at which results were obtained is day 28. Treatment efficacy was obtained by microscopic determination of blood film by three microscopists. The significance difference between the drugs is showing us that AL can be used as the first line drug



SDI Review Form 1.6

	The conclusion of the authors is that all treatments are effective and could be used. However, in discussion, a significant difference between different treatments is stated (but not commented)? What is the conclusion or the consequence of this difference? Ethical agreement N° should be confirmed.	of choice as recommended by Federal Ministry of Health (2005) and there is the need for it to be used as the first line drug for the treatment of uncomplicated malaria in Nigeria.
--	---	--



SDI Review Form 1.6

Minor REVISION comments	Sulphadoxine-pyrimethemin is I suppose Sulfadoxine-Pyrimethamin? Artesunate being abbreviated AS, I suppose artesunate – supfadoxine-pyrimethamine should be AS-SP in tablets 1, 2 and 3 (and not AR-SP)? Please provide the reference for the sentence line 46/47. Line 54 : combined instead of combine Line108 : all patients were examined during first four days; but line 93 states that daily visit was done on d 1, 2, 3, 7, 14, 28? Is this a different kind of examination? Line 115 : <i>Plasmodium</i> instead of <i>plasmodium</i> Line 140 : a total of 185 patients is given, but the sum of different groups is different (47+50+35+42 = 174). If some patients abandoned the study, this should be briefly stated and the reason cited (if medical). Line 139 : <i>P. falciparum</i> instead of <i>falciparum</i> Lines 146-147 : sentence unclear. Line 204-205 : new infection (as in 2.3 paragraph title) is a better term compared to reinfection (reinfection could be confusing if understood as infection again with the same genotype of <i>Plasmodium</i> Lines 206-207 : parenthesis missing for p and interval Line 237 : <i>Plasmodium</i> instead of <i>plasmodium</i> Line 238 : considered instead of consider Line 256 : antimalarials instead of antimalarial Line 281 : Is the reference 3 still up to date?	Sulfadoxine instead of sulphadoxine. Artesunate is AS instead of AR. Reference was provided in the original article in the sentence line 46/47. All patients were closely monitored for the first four days because of importance of these days in the research work. Eleven (11) patients were unable to conclude the 28 day treatment for non fulfilment of the study conditions detailed is attached as study profile in the original article. Corrections were noted and changes were made in original article
Optional/General comments	The agreement from Ethical committee (NHREC/25/10/2013) was reportedly given for p16 (INK4a) expression on cases with cervical intraepithelial neoplasia (CIN) and squamous cell carcinoma (SCC) using immunohistochemical method (cf. article in African Journal of Cellular Pathology 7:41-46 (2016) by Umarr et al. entitled) – efficacy of antimalarial treatments is included in the same clinical study? Once abbreviation is explained, please use the abbreviation (or alternatively do not use abbreviations, but keep the same way throughout the manuscript).	This is because the two Ethical Clearances were approved by the same committee at the same meeting, so the reference number is the date of approval. We attached a scanned copy of the Ethical Clearance for your perusal. Noted.