



SDI Review Form 1.6

Journal Name:	Journal of Advances in Medical and Pharmaceutical Sciences
Manuscript Number:	Ms_JAMPS_40957
Title of the Manuscript:	Prevalence of Renal dysfunction and its relationship with CD4 and TNF alpha of HIV patients on Anti-retroviral Therapy in Port Harcourt.
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>)

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	1. Explain the discrepancy that in the abstract; authors state that they recruited 397 patients on Antiretroviral therapy for more than 3 years WHILE in the methodology section of manuscript they state that; they recruited 375 participants on HAART for at least 6 months 2. Introduction section is very scanty; - (a) Authors should explain more on the role of CD4 in renal dysfunction including pathophysiology and relevant studies on CD4 and renal dysfunction (CKD) in Africa setting like one of "Rwegerera GM, Bayani M, Taolo EK, Habte D. The prevalence of chronic kidney disease and associated factors among patients admitted at princess marina hospital, Gaborone, Botswana. Niger J Clin Pract 2017; 20:313-9. (b) Authors should describe role of cytokines in renal dysfunction and possible age and gender differences in cytokine production; as well as impact of HIV disease on cytokine production (c) Authors should highlight previous global studies on link between TNF alpha and renal dysfunction (d) Authors should justify why they chose to study TNF alpha over other cytokines (e) Antiretroviral drugs like Tenofovir may play a role in causing renal dysfunction; this role should be described (f) Importance of duration of HIV ± duration of HAART exposure should also be described 3. Materials and methods: # 65-67, provide reference; authors have described CKD (renal dysfunction) to be defined as $GFR < 60ml/min/1.73m^2$. This is the definition according to KIDGO guidelines and is used in most studies. Authors should therefore compare renal dysfunction ($GFR < 60$) Vs non-renal dysfunction ($GFR \geq 60$) against variables such as age, gender, CD4 and TNF alpha to answer study questions 4. # 66, 67; Classifying CKD 2 as GFR of 60-89 is not entirely correct as according to KIDGO guidelines; this should be accompanied with either evidence of proteinuria or radiological evidence of CD 5. # 68-70; Provide reference 6. Authors should state if there were any inclusion and exclusion criteria 7. Results section. # 82, Table 1 title should be corrected to; - " Demographic and clinical characteristics of study participants" 8. Table 1; CKD stage 1 with GFR of ≥ 90 should be accompanied by proteinuria or	This has been corrected. The observations have been noted and effected. Corrections have been made. There was no data for proteinuria and this has been stated as a limitation. Reference has been provided. Correction has been done It has been corrected. Proposed table has been adopted.



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	radiological evidence' other ≥ 90 is considered a normal GFR 9. Table 1: According to KIDGO guidelines, only 50/393 (12.7%) of patients had GFR OF $< 60\text{ml/min/m}^2$. These are the ones who meet the definition, hence 12.7% should replace prevalence of 55.9% stated in results section of both abstract and manuscript draft 10. Table 2 should be modified as proposed below; <table><tr><th></th><th colspan="2">Renal dysfunction (GFR < 60)</th><th colspan="2">Normal renal function (GFR≥ 60)</th><th></th></tr><tr><th>Variables</th><th>Frequency</th><th>Percentage</th><th>Frequency</th><th>Percentage</th><th>p-value</th></tr><tr><td>Age</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>18-27</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>28-37</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>38-47</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>48-57</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>>58</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Gender</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Male</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Female</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Mean CD4</td><td></td><td></td><td></td><td></td><td></td></tr><tr><td>Mean TNF alpha</td><td></td><td></td><td></td><td></td><td></td></tr></table> 11. According to the current Table 2; authors try to compare studied variables including CD4 and TNF alpha by gender. This is not the objective of the study; though if authors hypothesize gender to be a variable that could affect CD4 and TNF alpha; they should state that with references in the introduction section 12. # 113; Table 3 is redundant, it is not part of study question; information on age can be included as part of modified Table 2 as stated above 13. # 125; Table 4 is redundant, it is not part of study question (aim); the study was not designed to compare CD4 by age or TNF alpha by age. Information on Table 4 could be incorporated into Table 2 if authors wish to analyse by CD4 categories 14. # 92; authors should provide reference that made them categorize CD4 < 500; as well as for # 93, 94, CD4 of < 200 as immune failure 15. Information on duration of HIV and history of HAART regimen should be analyzed regardless of power as stated by authors. The two aspects are potential confounders as they have been previously shown to affect pattern of renal dysfunction 16. # 136; Table 5 is redundant; authors should focus to compare renal dysfunction versus studied variables 17. # 146; Table 6 on correlation is a good Table; Authors should focus on correlation of study variables that answer study questions; for instance correlation between renal dysfunction (GFR) against age, gender,CD4 $\pm$ duration of HIV, HAART regimen history. This Table should be simplified to show only focused variables 18. Discussion is scanty; it should be modified accordingly after addressing above issues 19. # 180, 181, 188; issues discussed here are not part of studied variables 20. Use of a single GFR should be stated as a potential limitation 21. Conclusion is not based on study findings; "The present study found that ART is associated with both improvement and worsening of renal function as time goes by"; this was a cross-sectional study and not prospective study. Likewise, "Female gender is also a risk factor and contributes to continuous decline in renal function"; this can't be true especially in a cross-sectional study		Renal dysfunction (GFR < 60)		Normal renal function (GFR ≥ 60)			Variables	Frequency	Percentage	Frequency	Percentage	p-value	Age						18-27						28-37						38-47						48-57						>58						Gender						Male						Female						Mean CD4						Mean TNF alpha						Table has been removed. Table has been removed. Reference has been provided Table has been removed. This has been corrected This has been done Discussion and conclusion has been revised based on your recommendation.
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Minor REVISION comments	1. Title should state "HIV positive patients" NOT "HIV patients" 2. Authors should minimize repetitions of similar information in the tables into word format	Corrected																																																																														



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Optional/General comments	1. Authors should include actual p-value whenever they state significance; and not to wait until Table 6 to provide p-values	corrected
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PART 2:

	Reviewer's comment	Author's comment <i>(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)</i>
Are there ethical issues in this manuscript?	<u><i>(If yes, Kindly please write down the ethical issues here in details)</i></u>	