



SDI Review Form 1.6

Journal Name:	Microbiology Research Journal International
Manuscript Number:	Ms_MRJI_32081
Title of the Manuscript:	Prevalence and Antimicrobial resistance patterns of extended spectrum beta lactamase producing Enterohemorrhagic Escherichia coli strain O157:H7 from cattle and humans in Moshi, northern Tanzania
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	The title only involves the prevalence and antimicrobial resistance of EHEC O157:H7, however, strains non-EHEC O157:H7 are also considered in the study. For this study, Is there only an informed consent or also the approval of an ethics committee? if so add the approval number. In line 68, it is said that the patients with diarrhea or abdominal complaints, what is the origin of the patients? Are they outpatients? since in line 185 refers to them as if they had all been hospitalized or curing a nosocomial infection, and that is the reason of the antimicrobial resistance.	We agreed with reviewer's comment, we made correction, corrected parts in the manuscript are highlighted in yellow colour, below are responses to reviewer; Since non-EHEC O157:H7 are considered in the study the title can be modified to be "Prevalence and Antimicrobial resistance patterns of extended spectrum beta lactamase producing Enterohemorrhagic Escherichia coli strain O157:H7 and extended spectrum beta lactamase producing Non-Enterohemorrhagic Escherichia coli strain O157:H7 from cattle and humans in Moshi, northern Tanzania" In this study informed consent was used, also Ethical approval for this study was granted by the Kilimanjaro Christian Medical University College Research Ethics and Review Committee (CRERC) with research ethical clearance number 669. Only outpatient were enrolled in this study.
<u>Minor</u> REVISION comments	In line 136, there is more prevalence in children under 5 years. Is the age statistically significant? In lineal 199, there are also workers who are healthy carriers, who may be transmitters of resistant strains but not generate disease. What explanation is given that E. coli O157: H7 was isolated from children younger than 5 years and not isolated E. coli non-O157: H7?	The age is not statistically significant since the P-value is > 0.005 Non-EHEC O157:H7 was also isolated from children younger than five years thought ESBL producing EHEC O157:H7 have slightly higher prevalence (21.10%) compared non –EHEC O157:H7 (15.8%). The higher prevalence in children younger than five years is due to vulnerability of children to contaminated soil



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		especially in the crowing stage.
<u>Optional/General</u> comments	In line 196, "It was evidenced by the discharge of sewages from human toilets into flowing water that directly contaminated the soil, grazing pastures or drinking water for cattle." It is repeated on line 189. On line 212, What antibiotics are the first selection for the gastrointestinal infections treatment? Since, it could be reason for the resistance and not fully attribute it to the misuse of these antibiotics.	We decided to remove line 189 to avoid repetition. The most common used first line antibiotics for the gastrointestinal infections treatment are Ampicillin and Tetracycline.