



SDI Review Form 1.6

Journal Name:	British Journal of Medicine and Medical Research
Manuscript Number:	2013_BJMMR_6088
Title of the Manuscript:	Doxorubicin Cardiotoxicity in Acute Lymphoblastic Leukemia: Possible Protective Role of Grape Seed Extract Proanthocyanidins
Type of the Article	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.

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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		
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments	<p>5</p> <p>I am reading manuscript 2013_BJMMR_6088 entitled " Doxorubicin Cardiotoxicity in Acute Lymphoblastic Leukemia: Possible Protective Role of Grape Seed Extract Proanthocyanidins" which you submitted to the British Journal of Medicine and Medical Research</p> <p>This manuscript describes Grape Seed Extract Proanthocyanidins play protective role in Doxorubicin Cardiotoxicity in Acute Lymphoblastic Leukemia.</p> <p>The English is not clear and concise. There are many instances of badly worded/constructed sentences. E.g.,</p> <p>Page 1, in Abstract Aim:To evaluate early DOX cardiotoxicity in asymptomatic leukemic patients and to explore whether GSE proanthocyanidins would prevent the DOX-induced cardiotoxicity. DOX should be doxorubicin</p> <p>GSE should be Grape Seed Extract</p>	<p>Abstract & the whole MS have been modified & revised and most of your comments were considered. Modifications & corrections were highlighted in yellow.</p>



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	<p>In Abxtract Place and Duration of study: Mansoura University Hospital, between January 2011 and May 2013 forty two newly diagnosed ALL patients were enrolled in this study. asymptomatic leukemic patients and newly diagnosed ALL patients, this two part is not comprehensible.</p> <p>Page3 2.2 Drugs Doxorubicin hydrochloride was provided in the form of Adriamycin vials (25mg/m2) according to BFM protocol . Grape seed proanthocyanidin extract was administered in the form of Gervital capsules (GSE; 150mg). It was provided by Arab Company for Pharm. and Medicinal plants (Mepaco, Egypt) and stored at 4°C until used. There were all sorts of names of doxorubicin: such as adriamycin and doxorubicin Other drugs should also be listed .</p> <p>In introduction, I don't follow the logic of your part, I would advice you to describe knowledge of and treatment of cardiac toxicity of Doxorubicin in acute lymphoblastic leukemia patients, in addition, you should describe the advantages of proanthocyanidins.</p>	<p>I don't get the point here. Apart from DOX in BMF protocol and GSE, no other drugs were administered.</p> <p>Introduction was revised according to your valuable comments to include the following items : cardiotoxicity as a serious complication of ANT antibiotics including Dox; Types of cardiotoxicity ; <u>Possible mechanisms involved in DOX-induced cardiotoxicity</u> ;Methods for early detection of cardiotoxicity especially conventional echocardiography and</p>
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	<p>Table 4 no line</p> <p>In discussion, I suggest that you focus on the protective effect and possible mechanism of proanthocyanidins in ALL, moreover, you should read literature more.</p> <p>Please do not revise only the examples indicated in the comments, but check your entire manuscript thoroughly and carefully to refine the language. You are encouraged to have the manuscript critically edited by a colleague in your field who is a skilled writer in English.</p>	<p>biochemical cardiac markers; <u>Several attempts that minimize the DOX-induced cardiotoxicity including Dexrazoxane, the most commonly used cardioprotective agent & finally GSE proanthocyanidins, the antioxidant of interest.</u> Regarding GSE, we mentioned structure, biological activities, and mechanism of action as cardioprotective agent.</p> <p>Discussion was revised regarding the knowledge, language, references. Five references were deleted & eight were added, in addition, limitation of study was listed.</p>
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