SDI Review Form 1.6

Journal Name:	**British Journal of Medicine and Medical Research**
Manuscript Number:	**Ms_BJMMR_20405**
Title of the Manuscript:	**Serum ferritin and severity scores in sickle cell disease patients in Nnewi (south east 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	**Methodology:** **Study design/location should be stated.** **Mode of data collection (interviews/questionnaire, etc) should be stated.** **Duration of study should be stated** **Details of scoring of disease severity (assigning of points) should be mentioned, to enable reproducibility.** **Definition of hypo/hyperferritinaemia in the study groups should be highlighted appropriately** **Lines 139, 155, 180, etc: Authors should refrain from personal allusions such as 'our' etc.**	The comments are noted with thanks, they have been integrated into the manuscript and highlighted as suggested.
Minor REVISION comments	Lines 54, 57: Typos errors should be corrected Line 97: statement 'didn't seem to be' should be rephrased. The result/p-value is in quantifiable terms Line 128: statement is incoherent. What is SAA? Line 188: the word, 'corroborate' may be more appropriate than 'confirm'. References Line206: consistent use of Vancouver style (and sentences cases) should be maintained.	SAA has been corrected to ASS (Asymptomatic Steady State). Statement 'didn't seem to be' has been rephrased and other corrections have been applied as suggested. References Consistent use of Vancouver has been applied
Optional/General comments	A clinically relevant study, provides fresh evidence on importance of chronic inflammation/ interpretation of ferritin levels and erythrocyte morphology in SCD management. Manuscript can be improved upon with the above suggested revisions	Comments are very much appreciated