



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	International Journal of Biochemistry Research & Review
Manuscript Number:	2013_IJBcRR_7264
Title of the Manuscript:	Can Total Antioxidant Capacity Be A Surrogate Marker In Chronic Obstructive Pulmonary Disease ?

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
The English its scientific merit remains poor. a) No multi regression analysis has been done! b) B) no cause given for the COPD in no-smokers c) C) no specific care was taken for the ex-smokers.	All the suggestions suggested by various reviewers towards language have been incorporated in the manuscript. English wherever required has been corrected and polished as suggested. I fully agree with the reviewer regarding the multi regression analysis to verify the contribution of any of each individual antioxidant to TAC. Multi regression analysis was not done as it is not required here, as there was no appreciable correlation of bilirubin, albumin, urate, and CP with TAC. I fully agree with the reviewer. Cause for the COPD in nonsmokers now has been incorporated in the manuscript along with relevant article. Dividing the smokers group of 43 subjects as ex-smokers and current smokers further makes the group small and thus compromising the statistical relevance. There is strong evidence that the disease progresses even after smoking cessation. Quitters of smoking cannot be considered as non-smokers. Creating a separate group ex-smokers, makes the group small with no additional information.



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What is the evidence of the clinical relevance of TAC from their results? (abstract /conclusions) Fig 1 and 2 should be appendix	Referring Table 2, 3 and 5, amply indicates TAC role in diagnosis of COPD. What has been highlighted is that clinically it will be difficult to differentiate between 3.8 and 4.3 (albumin) but comparatively easy to differentiated between 36 and 27.7 (TAC). So there are certain differences which are significant statistically but not clinically (as in case of albumin and urate). Table 5 is made to exhibit the clinical relevance. Sorry !, I could not understand the meaning of ‘Fig 1 and 2 should be appendix’. Appendix of what? I believe, you want Fig 1 and 2 should have an appendix. <u>Refer : SDI Paper Template Version 1.6 Date 11.10.2012,</u> There is no provision of appendix (legends). Therefore the figures are very clearly explained in the method section. Refer line 141-145 Finally, I sincerely thank the reviewer for meticulously going through the manuscript and giving extremely valuable suggestions, towards the overall improvement of article.
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