



SDI Review Form 1.6

PART 1:

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2012 IJTDH 2732
Title of the Manuscript:	Visceral leishmaniasis (Kala Azar) elimination from Indian sub-continent by 2015?

General guideline for Peer Review process is available in this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

- This form has total 9 parts. Kindly note that you should use all the parts of this review form.



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PART 2: Review Comments

	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>
<u>Compulsory</u> REVISION comments	1. Since Post kala-azar dermal leishmaniasis (PKDL) patients are looked upon as reservoirs of VL, authors may discuss strategies dedicated to the monitoring and complete alleviation of PKDL for the effective control of VL. 2. In Section "Finding", author should also include unavailability of a noninvasive, highly specific and sensitive rapid diagnostic test. 3. In Section "Future course towards elimination" author should include strategy to prevent misuse of drug (easy availability over the counter). 4. In Line 232, author should also mention the importance of awareness in endemic region through local advertisement.	Text Added ". Improved detection of PKDL cases by health workers would be useful. The PCR should be promoted for the diagnosis of PKDL. Supervised treatment could be a way for improving treatment compliance by patients." Text Added "Besides this unavailability of noninvasive rapid diagnostic test aggravates the delay the diagnosis" Text Added "Over the counter sale of anti leishmanial drugs should be restricted. This could be a major step towards preventing the emergence of resistance against anti leishmanial" Text Added "Various forms of local advertisement like street plays, health talks, hoardings and other along with electronic media will prove to be a powerful tool for this."



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<u>Minor</u> REVISION comments	1. In Line 233 and 234 authors should include the need of coordination among policy makers, practitioners, researchers, NGO's and the infected people. 2. According to Ref. 10, the no. of kala-azar cases in 2012 (P) does not match with that of Fig. 1. 3. Page 4, line 118- Amphotericin B is not an oral drug and administered parenterally. 4. Page 4, line 111- According to reference 11, case definition for suspecting kala-azar also includes 'splenomegaly'. 5. Reference 13- Names of the authors should be spelled correctly. 6. Page 2, line 62- The population at risk in Nepal does not match with reference no. 13, 7. The scientific names mentioned in the manuscript should be italicized. 8. Page 4, line 110- Omit 'more' between 'than' and 'two'. 9. Page 6, line 168- 'harbour' should be replaced with 'harbours'.	Revised Data has been updated & corresponding date of update has been mentioned Revised Revised Revised Revised Revised Revised
<u>Optional/General</u> comments		