



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	MS: 2013_IJTDH_6019
Title of the Manuscript:	Current and future trends in the clinical diagnosis of Rickettsioses <i>lato sensu</i>
Type of the Article	Review 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)
Compulsory REVISION comments	Although some scientists consider <i>Orientia</i> separately from genus <i>Rickettsia</i>. However as this article describes Anaplasmosis and ehrlichiosis, it is not appropriate to exclude <i>Orientia</i> from this review. Article is too long and authors have included many unnecessary text: Ie: Under Alternative and novel approaches they have included mini-reviews under each technique (6.1, 6.2, 6.3, 6.4, 6.5). They should stick to the value of such techniques in relation to relevant organisms under the theme. Paragraph lines 103-139: Authors should summarize the findings of the studies and give conclusions under each technique or relevant areas. (Similar to that is written from 140-145) This also applies to paragraph lines 183-216, paragraph lines 366-387	Comments have been added to the introduction with regards to <i>Orientia</i> and why a complete section was not provided. As the referee has made the comment that the manuscript is too long and has suggested reduction, which we have performed, expanding the text with a full coverage of <i>Orientia</i> would have been contradictory to his subsequent suggestion. Unnecessary texts and explanations about the techniques have been trimmed to reduce length of the manuscript. Summary lines with the findings of these studies and their importance have been added to the relevant paragraphs and highlighted in yellow.
Minor REVISION comments	Some sentences are too long and suggest fragmentation into shorter sentences. Spelt wrong: ehrlichiosis: row: 23, mites: row 24 line 35 should read "gold"	All minor revisions have been addressed and changed are marked in the text with yellow.



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	line 50: Transitional spelt wrong Line 81: Serological diagnosis Line 83: titres Line 84: a diagnostic IFA titre of > 64 is not considered positive: A titre of >1;64 is considered exposure or probable acute infection without a rising titre. Titres should be interpreted based on the background sero-prevalence of the endemic area. 93: early species diagnosis 93-94: some PCR target ...others are designed to.. 100-101: even ticks from the diseased patient is not appropriate. 157- myalgia and arthralgia 166-168 sentence too long 248-249: needs to be re-written 255: culture negative bacterial infections 256: not clear 257-267: not clear 323: other forms of infections 329: delete word clinically 329: and rarely severe pneumonia resulting in acute respiratory failure 330: of acute Q fever detected biochemically by increased levels of..... 334-340: re-arrange the sentence order to include organ involvements first and then the serological changes 344: re-write the paragraph 351: not clear 360-261: not clear 398: cannot be a child birth: may use offspring	
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<u>Optional/General</u> comments		
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