



SDI Review Form 1.6

PART 1:

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_3838
Title of the Manuscript:	Pattern and risk factors for musculoskeletal complications of sickle cell anaemia in South-east Nigeria: a retrospective study

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 7 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 (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	a)Appropriate title. b)Study design: retrospective study, appropriate. c)Appropriate descriptors. d)Adequate summary. e)Content: appropriate, although it needs more details as directed in the comments to the authors: - among those participants how many had genetic counseling? The lack does not contribute as a risk factor? - Have you evaluated other vaso-occlusive risk factors such as smoking or drugs? - What about the presence of other diseases or complications associated and as stroke, splenic sequestration? - What about the presence of musculoskeletal pain crises?	Thank you very much for the thoughtful comments. All our adult patients and parents of those aged less than 18 years are routinely provided with genetic counselling soon after diagnosis is sickle cell disease is made. We have included this information in the manuscript. Our patient population are not routinely evaluated for their smoking and drug habits; partly because of the low rates of smoking and drug use. We will consider evaluating these factors in future controlled prospective study. Other diseases were present in a very small number of patients:



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		stroke (5), pulmonary hypertension (3), cholelithiasis (6), splenic sequestration (5), acute chest syndrome (1), and abdominal crises (1). We felt these were too small for analysis as risk factors of musculoskeletal complications. Further statistical analysis were therefore not performed with these variables. We used vaso-occlusive crises to represent patients that had musculoskeletal pain.
<u>Minor</u> REVISION comments	References: appropriate, although it needs updating. (19,21-23,26,29)	These references have been updated
<u>Optional/General</u> comments		