



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_6809
Title of the Manuscript:	Bloodstream infections and malaria as causes of fever among adult medical patients at a referral hospital in Malawi
Type of the Article	Research Paper

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:

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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	An important study following what was published more than 10 years ago. However the study has major issues in the following areas: 1) The selection of patients based on a single temperature reading leaves out large numbers of patients who may have had either malaria or bacteraemia but with a normal temperature at time of evaluation 2) Authors indicate that those patients that could not give consent because they were too ill leaves a lot of patients that could have changed the results 3) Not recruiting patients during weekends leaves large numbers of potential patients that would have changed their findings. We know that patient that seek care over the weekend tend to be the sicker ones 4) This may not have been their aim but trying to identify factors that may help distinguish between the two pathologies would have made the paper more interesting 5) Authors should present data better on patients that had dual infection and if possible provide the clinical parameters that would help the clinician distinguish between the two 6) It would be important to know how many of the HIV infected patients WHO stage 3 or 4 conditions on the day of admission. 7) It would be important to know how many patients were admitted with a febrile illness during the study period. This information will put into context the results that are	



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	being presented. 8) How did the clinical syndromes correlate with the blood culture and malaria diagnosis 9) Some clinical syndromes that would be expected e.g. meningitis, UTI etc are completely missing. 10) It would be useful to know if any of the HIV positive patients on ART? 11) It would be useful to know the effect of cotrimoxazole prophylaxis on the blood culture and malaria test results 12) It would be useful to know the effect of prior antibiotic therapy (amoxicillin etc)on blood culture results. 13) Would the authors provide some insights on how the clinician or nurse verified the information that was provided by the patient on medications that were being taken prior to study enrollment 14) In figure 1, it is not clear what is meant by valid results 15) One would be interested to know what the diagnosis was of those that did not receive a diagnosis of malaria or bacteraemia 16) Statistical analysis will be informed by what the authors decide to do with the revision. 17) The discussion would be informed by the recasting of the results.	
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<u>Minor</u> REVISION comments	1. In the abstract, one of the conclusion they authors present is that the use of malaria RDT has to be carefully supervised and adherence to test results is advisable, but they do not provided information on how malaria RDT underperformed to result in this conclusion 2. The authors need to rephrase line 22 and 23. It does not read well to say bloodstream infections are emerging. 3. In Many places where authors use Africa, they should replace it with Malawi. Most of the information they are quoting pertains to Malawi, 4. Line 32 the words case fractions should be replaced by proportion (I think this is what the authors would like to convey to the readers 5. Lines 52 to 54 belong to the introduction, not the methods 6. There is some confusion with the numbers in the paper. In the abstract and the body of the paper (lines 174 and 176, the number diagnosed with malaria need to be consistent.	
<u>Optional/General</u> comments	The authors need to reflect on the introduction and how it relates to the key messages they want the reader to take home.	

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