



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2014_IJTDH_11053
Title of the Manuscript:	Visceral Leishmaniasis Elimination Program in Bangladesh and Achieving Millennium Development Goal
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		
Minor REVISION comments	This is a review article is a gives recommendations on how to meet MDG for Bangladesh and the recommendations seem sound. However, before publishing several grammatical corrections and rephrasing needs to occur. Please correct the following lines: 13, 14, 15, 16, 17, 18, 19, 20, 29, 33, 66, 181, 187, and 200.	The revised lines are given below: Line 13 - 20: The current burden of VL disease is 23.4 times higher comparing to the MDG of 1 case per 10,000 populations by 2015. In order to achieve the MDG various national strategies have been taken so far to eliminate VL from Bangladesh. Government of Bangladesh constituted a national steering committee and formed a technical working group to provide support to VL elimination program. Lack of trained and efficient labour force, along with lack of knowledge among the people is big challenges for VL elimination in Bangladesh. In addition, drug unavailability, unfriendly behavior of health worker and existence of unofficial payment to the heath provider in public hospital work as barriers to achieve MDG. Line 29: <i>Millennium Development Goal</i> Line 33: Visceral Leishmaniasis (VL) is a serious public health concern with an estimated 200 million



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		people at risk of infection in Indian subcontinent. Line 66: 64% of THE is borne by the household through out of pocket expenditure. Line 181: A cost effective diagnostic tool to facilitate community based PKDL cases detection, along with shorter course treatment schedule, is need to be developed. Line 187: Now deleted. Line 200: An experience from the maternal health voucher program [22] can be adopted to improve payment of services.
<u>Optional/General</u> comments		