



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2014_IJTDH_12683
Title of the Manuscript:	Paediatric medical morbidity and mortality in a suburban hospital in Jos, North -central Nigeria
Type of the Article	Original Research 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)
<u>Compulsory</u> REVISION comments	I liked your paper very much and I believe you are in a correct way, but you need to improve some parts. In the introduction, when you explain about your country and the health situation, I think that you need to explain about how the health system works, how the patient finds or accesses your hospital. I asked because in the line 54 you said: "Vom Christian Hospital, <u>a secondary level</u> mission hospital situated". How many pediatrics consultations are performed per day? What is the staff that makes pediatric consultation? When the patient is discharged from the hospital, the doctor can send a discharge summary to the physician in primary care to provide continuity of patient care? I am asking this because the diseases found in your study are preventable in primary care. You can explain if all children are from the same area around the hospital. Do you believe that is possible a different geographic distribution to be related to different disease causes? You need to review the numbers in the line 13, because they are different from the report quoted where Nigeria and India are appointed like responsible for 1/3 deaths under 5 years in the world. You need to review the Nigeria population number too.	Thank you. Correction made in lines 51 – 57, 60,61. Added in line 78 Addition made in lines 75 – 78.. Addition made in line 61. Addition in line 59 - 60. Most of the patients are from the local communities. Line 29 -33. In the reference 1: committing to child survival by unicef 2013, this is stated on line 10 under the heading : regional disparities on page 9 of the document. It is also shown on fig 6 on the same page. The figs about Nigeria are found in pgs 10 and the table on pg 16.



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	Well, you talked about mortality and morbidity under 5 years old, but your research was under 18 years old. You need to show the rates related to age group 5 to 18 years old. You know these different age groups have different causes for illness and death. Some causes are related to childbirth and prenatal care. Others causes are related to postneonatal period after 1 year old that it is more related to the environment. Material and methods: I think if your study is showing only the age group less than 5 year, it would better focus. I would like if you had better explained the criteria used to select the cases and disqualify cases, in lines 74 to 77: "An admissions/ discharge register was opened and kept of all children aged between birth to <18 years who were admitted into the paediatric unit of the hospital. The register was updated daily and waschecked regularly by the supervising consultants. Data of all consecutive admissions of all children with non-surgical (medical) conditions was entered into the register". You need to explain the data collection, which variables were selected for the study and why they were selected. Please, you need to review lines 79 and 80. When did you start the data collection? Did you have a pilot study before the main study ? If you did, please explain it. When you talk in the line 210 about the immunization against meningitis, which type are you talking about? Can you be more specific about what type of meningitis is more prevalent in the hospital? You talked about prematurity, lines 212 e 213, I would	For the figure on the Nigerian pop, the fig was obtained from ref 5 , world health statistics 2013 which gave an estimate of 162,471,000. Different documents quote diff figs, mostly estimates. Thank you for your comments. Additions made in lines 33 - 36. The objective of the study was to determine the pattern of paed morbidity and mortality in all children under our unit. The reason for this is that the posting of our residents to vom is for community paediatrics. It was our 1st time there so we wanted to have this information in order to better meet the needs there, not just in the hospital but also in the community; which we have started doing already. We decided to have it published so that it can be a reference source that can be referred anytime in the future. . Lines 84 – 85. Although the register was opened at the beginning to ensure completeness of hospital records, but data for this study was collected retrospectively. So it was a retrospective study. Therefore a pilot wasn't done. Addition in lines 208 – 212. Also 115 – 117.
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	like if you could explain about the most important factors to determine prematurity in our area, like mother age, disease, low access to prenatal care or others? In your conclusion, you need to be clear what your research shows is the hospitalar morbidity and mortality and that it doesn't mean the morbidity and mortality in population in general.	Lines 212 – 216. Done with references. Correction made in Lines 217 – 219.
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Minor REVISION comments	In line 48 when you said: “Furthermore, this information will guide appropriate allocation of scarce resources”. I had doubts about what is in your country the total expenditure on health per capita. What position is Nigeria in global rank? How much is the expenditure in the rural areas? Where do fifty percent the Nigeria’s population lives. How long is the child stay in the hospital and how much does it cost to the hospital? Maybe you can prove that it is better to invest in primary care because it is less expensive. Material and methods: In line 88 you said: “Chi square was used for comparison of categorical data. A P value of < 0.05 was considered statistically significant” I prefer: "The comparison between the categorical data was performed with the chi-square test, considering as statistically significant if less than 5% p". Results It will be more clear if you put the “Outcome” before “Morbidity” You talked about mortality for age group, but I think it was better if you put one table about death causes for age group, like in morbidity. In line 102 you need to rewrite: “chronic liver disease, afebrile seizure nephrotic syndrome, poisonings, neardrowning, <u>etc.</u> were categorized as others” Discussion:	It has been changed line 44 – 45. . We don’t have access to the financial records of the hospital. Change made in lines 92 – 94. Changed. Lines 101 – 103. Table 3 added. Removed. It was a repetition.
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	You repeated the contents in the lines 127 e 128 and you can pull it off: "This retrospective analysis was conducted to determine the pattern of paediatric morbidity and mortality in a secondary level health facility located in a sub-urban area in North Central Nigeria". Please provide appropriate reference: Line 163 - improved immunization in Nigeria; Line 164 - control of diarrhea disease programme. I suggest moving this part to the result: "In infants less than 2 months of age, the commonest causes of morbidity and mortality were prematurity, perinatal, asphyxia and septicemia". I would also suggest moving this part to the introduction near the line 37: "Thus they are the target age group for the millennium development goal (MDG) 4. It is therefore important that intervention strategies should target this age group in order to achieve the MDGs".	This has been removed. Added Removed. Removed.
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<u>Optional/General</u> comments	You need to review some parts, which the words are together for example, lines: 14 line – admittedinto; 49 line – paediatricadmissions and others. You need to review this abbreviations: Line 137 VCH Line 150 - AGE - acute gastroenteritis Line 174 – ANC Line 203 – PEM - Protein energy malnutrition Line 206 – CFR - case fatality rate Line 210 – IMCI Line 225 – PHC Ethical considerations: The study obtained ethical clearance from the Human Research Ethics Committee of the Jos University Teaching Hospital, in what number?	Done. Done. Some previously defined. Added line 89.
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