



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2013_IJTDH_7951
Title of the Manuscript:	Seroprevalence and relative risk of HBsAg among female patients seeking healthcare service in Bo Government Hospital, Sierra Leone: 14-months database study
Type of the 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:

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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	The authors report an exceedingly high HBsAg seroprevalence (47.52%) among females that participated to the study. This is much higher than the estimated national HBsAg seropositivity (3-5%). However, as the authors indicate in the Methods section, the participants were referred to the laboratory based on the suspicion of being infected with either HIV or viral hepatitis or coinfection with both. Thus, the population was at high risk for being HBsAg-positive, thereby explaining the very high percentage of seropositivity. For this reason it appears very difficult to draw conclusions about the overall prevalence of HBsAg seropositivity in the population of this geographic location compared to others of the same or other countries. The possibility that the authors may consider is to compare their results with those obtained in study populations that were accrued on the basis of identical or very similar criteria.	Observation noted, our study is now compared with other Sierra Leone HBV studies see Line 158-171. Additional justifications for our alarming high HBsAg seroprevalence has been added in the Results and Discussions in our study.
<u>Minor</u> REVISION comments	The authors should clarify the meaning of "referring the participants on the basis of suspicion of being infected...". How did they define suspicion?	Reasons for patients been suspected for HIV infection, viral hepatitis infection, or coinfection with both HIV and HBV leading to subsequent referral for HBV laboratory testing are; results obtained from physical diagnosis and case history findings which includes but not limited to passing of frequent stool, weight loss, presence of skin rash, anemic, loss of appetite, persistent and unproductive coughing at night.



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	Why did they consider only female individuals?	Females were exclusively considered for this investigation because of their elevated risk of HBV infection and the role they play in the HBV transmission cycle. Women are documented as very important in the vertical transmission of HBV to the fetus. Also considering the fact that for a woman to become pregnant unprotected sex is required which makes a pregnant woman to be at elevated risk of becoming infected with HBV than their non pregnant woman or male counterparts.
<u>Optional/General</u> comments	Overall, it appears difficult to extract a take-home message from this study other than that a high percentage of individuals being at high risk for HBV infection are in fact HBsAg-positive. The study may gain significance if the results are compared with similar studies performed in other geographic locations.	Comment noted and adhered to; study results is now compared with other HBV studies done in Sierra Leone.