



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	2015_IJTDH_17725
Title of the Manuscript:	Assessment of Accuracy and Effectiveness of Rapid Diagnostic Test for Malaria Diagnosis at Primary Health Centres in Abeokuta 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>)



SDI Review Form 1.6

PART 1: Review Comments

	Reviewer's comment	Author's comment <i>(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)</i>
<u>Compulsory</u> REVISION comments	Lines 36, 37, 38, 39 &40: Mortality rate due to malaria has reduced, Please cite current reference WHO 2013. Line 88: Is Patient who or used experience symptoms of malaria? Line 91: How many mls of blood was collected from each Participant? Line 93: Did you use thin or thick blood film for malaria microscopy? Line95: What concentration of Giemsa stain was used to stain the blood film? Line 100: How was the RDT carried out? That is, the procedure. Line 196: QBC cannot be used as a gold standard, you can only compare QBC with microscopy which is the gold standard. Line 127: About 70.1% claimed to have used drug or herb product, did you ask them the type drug used? Line 221: I disagree with this statement that RDTs are designed primarily to detect parasite in fresh blood of finger prick. RDT can still detect the presence of parasite in old sample collected in an EDTA bottle since it is	We have looked into that, and have corrected it citing WHO, 2013 That have been reframed as the participants are patient who experience symptoms of malaria About 2ml of blood were taken and has been included in the text Thick and thin blood film were used for malaria microscopy 10% giemsa solution was used to stain the blood film this has also been included in the text The Procedure has been included in the text The text has been re-written as using QBC as control. Yes, most of them took anti malarial drugs while some of them took herbs You are right, but what we are emphasizing here is that it has to be collected through capillary pipette method, not directly from the pricked fingers into the RDT test well.



SDI Review Form 1.6

	antigen based. Line 229: it only affects the specificity and not sensitivity of RDT because it gives false positive (FP) result. Lines 236-239: Please reframe these sentences; it is not clear to me. Line 240: I expect the result of the RDT to be FP rather than false negative (FN) except the antimalaria used did not clear the entire parasite. The author did not state the brand of RDT used for this study. This is because some RDTs are not WHO certified, So it will be of interest to know the brand of RDT used for this study. References: The references used in this study are not too current. Please try and look for current references for this study. Conclusion: The general conclusion that the rate of false negative results of RDTs kit is high should be limited to the brand of RDTs used for this study. This is because not all the brands of RDTs were used for this is study.	Besides, WHO (2006) also quoted that RDTs are designed primarily to detect parasite in fresh blood of finger prick. The statement has been re-structured as Studies have shown that recent treatment with anti-malarial therapy can have a variable effect on the specificity and accuracy of RDTs result The sentences has been reframed Yes, the fact that they used anti malaria drugs does not mean they used the standard drugs and does not translate to total parasite clearance. This might be responsible for records of false negative samples if parasitaemia is low and not detectable by the kit. The RDT brand used for this for this study has been included in the material and methods session of the text The references had been updated. Since the RDT brand had been mentioned, the conclusion is applicable to the brand. furthermore, the kits used in the study were the free kits given by the Government nationwide (Nigeria) for diagnosis of Malaria.
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<u>Minor</u> REVISION comments	Line 76: Please replace with South-West Nigeria. Line 82: Please Subject with Participates Line116: Please check the spelling of demographic	Done Done Done
<u>Optional/General</u> comments	Good paper	