

## Review Form 1.7

Journal Name:	<a href="#">International Blood Research &amp; Reviews</a>
Manuscript Number:	Ms_IBRR_110591
Title of the Manuscript:	Evaluation of the biological response to acetylsalicylic acid by platelet occlusion time in pregnant women in Brazzaville
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:

(<https://www.journalibrr.com/index.php/IBRR/editorial-policy> )

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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)
<p><b>Compulsory REVISION comments</b></p> <ol style="list-style-type: none"> <li>1. <b>Is the manuscript important for scientific community?</b> (Please write few sentences on this manuscript)</li> <li>2. <b>Is the title of the article suitable?</b> (If not please suggest an alternative title)</li> <li>3. <b>Is the abstract of the article comprehensive?</b></li> <li>4. <b>Are subsections and structure of the manuscript appropriate?</b></li> <li>5. <b>Do you think the manuscript is scientifically correct?</b></li> <li>6. <b>Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</b></li> </ol> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p>	<p>1-yes, ASA is one of the most widely used prophylactic medication. Further research is often needed to illustrate the mechanism and interaction with other medications.</p> <p>2-yes</p> <p>3-partially, some comments need to be addressed.</p> <p>4-overall yes, but the figure is poorly illustrative and many language mistakes in the tables.</p> <p>5-Some comments need to be addressed along with corrections in order to be scientifically correct.</p> <p>6-references are not consistent with the same style. More recent refences may be included.</p> <p><b>Abstract:</b></p> <ol style="list-style-type: none"> <li>1- 1<sup>st</sup> 2 lines: no illustration of when WHO recommended ASA.</li> <li>2- 2<sup>nd</sup> paragraph: TOP: repeated wrong abbreviation. What are PTWT &amp; PFA-200 stand for? Should be illustrated.</li> <li>3- 3<sup>rd</sup> paragraph: 48.7% &amp; 20.5%, where is the remaining %? What is the indication in the remaining part of the studied women?</li> <li>4- 4<sup>th</sup> paragraph, what is the p value to signify the complications in non-responsive ASA?</li> </ol> <p><b>Patients and methods:</b></p> <ol style="list-style-type: none"> <li>1- Have you considered the compliance of ASA intake in the inclusion criteria?</li> <li>2- 1<sup>st</sup> paragraph, last line: what does it mean "The selection of pregnant animals were exhaustive"?</li> <li>3- Paragraph2: when were the patients' samples, in which stage of pregnancy, in relation to the ASA intake? Have you considered the duration of ASA intake in relation to the weeks of pregnancy? Could this affect the results?</li> <li>4- Paragraph 2: the line before the las one: delete respectively, language mistake.</li> <li>5- Paragraph 3: Why non response to ASA was defined by POT&lt;150, while the normal range you mentioned is 80-150? Pleaase refer to the paragraph before the last in discussion, you mentioned: TOP values corresponding to the diagnosis of ASA resistance may fluctuate during pregnancy due to the expansion of plasma volume, changes in blood cell counts, coagulation factors and steroid hormones during pregnancy, So how could you consider 150 as your cut-off limit?</li> </ol> <p><b>Results:</b></p> <p>1-paragraph 1: on referring to gestational hypertensive disorders (48.7%) and chronic arterial hypertension (20.5%), where is the other %, what are the definitions of both? Is there any overlap between them? What are SA and gestational carrier?</p> <p><b>Discussion:</b></p> <p>1-paragraph 4: You mentioned BMI 28.3kg/m2, where in the results? How could you know it is comparable with the other study mentioned? 2-paragraph 4; The mean gestational age at initiation of ASA treatment was higher in our</p>	

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	<p>series (14.3 SA±4.6), where are these data in the results?                  In the same paragraph”                  The majority of patients were recruited in the second trimester of pregnancy, with a mean age at the time of platelet occlusion time (POT) of 26 weeks' amenorrhea and 2 days ± 7.9.”, this seems different from the 1<sup>st</sup> line.                  3- The TOP averages observed in the first two trimesters in our work were respectively close to and slightly higher than those observed in the third trimester, where in the results?                  In the same paragraph, what is OFR?                  4-Last paragraph: what is Tx?</p>	
<p><b>Minor</b> REVISION comments</p> <p>1. <b>Is language/English quality of the article suitable for scholarly communications?</b></p>	<p>Many language mistakes are present. The tables are mostly not written in English. Not all abbreviations were illustrated the first time the authors use. Platelet Occlusion Time (POT) is mostly written as TOP in most of the manuscript.</p>	
<p><b>Optional/General</b> comments</p>	<p>1-The authors did not consider the confounding factors in the studied population of the pregnant women. What were the comorbidities associated? Was there any overlap in the indications of ASA intake?                  2- How was the sample collected? Was it randomized?</p>	

**PART 2:**

	<b>Reviewer's comment</b>	<b>Author's comment</b> (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)
<p><b>Are there ethical issues in this manuscript?</b></p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

**Reviewer Details:**

Name:	<b>Radwa Ezzat Amin Mohamed</b>
Department, University & Country	<b>Cairo University, Egypt</b>