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| Journal Name: | [**Asian Journal of Pediatric Research**](https://journalajpr.com/index.php/AJPR) | |
| Manuscript Number: | **Ms\_AJPR\_137092** | |
| Title of the Manuscript: | **Study on drug utilization pattern of acute gastroenteritis in children aged 1 to 12 years in tertiary care teaching hospital** | |
| Type of the Article | **Original research article** | |

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| PART 1: Comments | | |
|  | Reviewer’s comment **Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | **Author’s Feedback** (It is mandatory that authors should write his/her feedback here) | |
| **Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.** | **Gastroenteritis represents one of the leading causes of morbidity and mortality among children under five in low-and middle-income countries Data from developing countries are scarce and therefore well appreaceated Tertiary centers usually hospitalise a more severely ill population Thus it could give a better idea about the top of the iceberg that represent more neglected and worse cases On the other way it could shed light on the effect of use of antibiotics in extreme** | The study highlights the value of probiotics, zinc supplements, and ORS as first therapies for pediatric AGE. Depending on how severe the symptoms are, supportive therapy including IV fluids and antibiotics are used. Standard treatment procedures can improve results and encourage responsible drug usage in children's care. | |
| **Is the title of the article suitable?**  **(If not please suggest an alternative title)** | **Treatment paterns of pediatric gastroenteritis/infectious colitis in a tertary hospital** | The title of the article is suitable | |
| Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here. | **Abbreviations should be explained on their first appearance in the text The pattern of treatment in not clear in the abstract How many patients presented with bloody diarrhea? In which way severity was defined? How many patients received empirical antibiotic treatment? Why did so many patients end up to receive antibiotics? Was racecadotril allowed? What the authors mean by antiulcerants? Do they mean PPIs? Aren't they increase germ load in the small bowel? What happened to those who did not improve How many patients were deceased? Who could be sent home after improvement ? Was there any follow-up taken place after discharge?** | The abstract of the article is more enough with the information, need not to add or delete the points. | |
| Is the manuscript scientifically, correct? Please write here. | All the matters pointed in the abstract discussion should be also handled in the text Power of the study should be calculated There is no comparative group that could shed light on the patterns used in the study period Except of percentages crude numerical values should be provided Of course the study population is 100 patients but not all subgroups have equal size Age distribution should be also discussed When ORS Tx was changed to iv fluids When antiemetics were started? Was any patient on Ppis before admission? On who many patients antibiotic Tx was based on cultures? How many patients received antibiotics for colitis and how many for the possibility of a concurrent infection in another system ( pneumonia, upper respiratory infection)? The volume of fluids received should be described? Outcomes should be discussed in detail and a multivariated analysis on the effect of Tx parameters on the final outcome should be performed | All the matters pointed in the manuscript were collected based on the information obtained from our hospital. So the Outcomes mentioned in this article has been analysed and updated. | |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.** | Ciccarelli S, et al Management strategies in the treatment of neonatal and pediatric gastroenteritis Infection and Drug Resistance 2013;6:133-161  Bruzzese E, et al. Antibiotic treatment of acute gastroenteritis in children F1000Res 2018;7:193-202  Ashkenazi S et al ***The Pediatric Infectious Disease Journal******1993 ;[10:140-148](https://journals.lww.com/pidj/toc/1991/02000)***  ***Freedman SB, et al The Treatment of Pediatric Gastroenteritis: A Comparative Analysis of Pediatric Emergency Physicians’ Practice Patterns AEM 2011;18:38-45***  ***Freedman SB, et al Prospective Assessment of Practice Pattern Variations in the Treatment of Pediatric Gastroenteritis***Pediatrics2011 127 : e287–e295 | *World Health Organization. Action Programme on Essential Drugs and Vaccines. (‎1993)‎. How to investigate drug use in health facilities : selected drug use indicators. World Health Organization.*[*https://iris.who.int/handle/10665/60519*](https://iris.who.int/handle/10665/60519)  *Begum N, Shaik DH, Kollipara UL, Mopidevi S. Drug utilization pattern In Pediatrics With Gastro-Intestinal Tract Infections-A prospective study.*  *Bhaveshaikh N, Sukumaran S, Vyas U. Drug prescribing pattern in acute gastroenteritis in an in-patient setting in a private hospital. Int J Res Med Sci [Internet]. 2017 Mar. 28 [cited 2025 May 26];5(4):1256-9. Available from:* [*https://www.msjonline.org/index.php/ijrms/article/view/2933*](https://www.msjonline.org/index.php/ijrms/article/view/2933)  *Panchal JR, Desai CK, Iyer GS, Patel PP, Dikshit RK. Prescribing pattern and appropriateness of drug treatment of diarrhoea in hospitalised children at a tertiary care hospital in India. Int J Med Public Health. 2013;3:335-41.*  *Baddour LM, Yu VL, Klugman KP, Feldman C, Ortqvist A, Rello J, et al. Combination antibiotic therapy lowers mortality among severely ill patients with pneumococcal bacteremia. Am J Respir Crit Care Med [Internet]. 2004;170(4):440–4. Available from:* [*http://dx.doi.org/10.1164/rccm.200311-1578OC*](http://dx.doi.org/10.1164/rccm.200311-1578OC)  *Nateghian, A., Moshfegh, F., & Shoja, Z. (2019). Study of Clinical Characteristics and Clinical Complications of Norovirus gastroenteritis in Admitted Children to the Hospital. Journal of Pharmaceutical Research International, 30(5), 1–10.* [*https://doi.org/10.9734/jpri/2019/v30i530277*](https://doi.org/10.9734/jpri/2019/v30i530277) | |
| Is the language/English quality of the article suitable for scholarly communications? | Minor lingustic polishing is needed | Linguistic polishing has been done. | |
| Optional/General comments |  |  | |

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| **PART 2:** | | |
|  | **Reviewer’s comment** | **Author’s Feedback** (It is mandatory that authors should write his/her feedback here) |
| **Are there ethical issues in this manuscript?** | *(If yes, Kindly please write down the ethical issues here in details)* | No |