



SDI Review Form 1.6

Journal Name:	<a href="#">International Journal of TROPICAL DISEASE &amp; Health</a>
Manuscript Number:	Ms_IJTDH_68279
Title of the Manuscript:	Blood Neutrophil / Lymphocyte Ratio and C -reactive protein / Albumin Ratio as Markers of Response for Treatment of Spontaneous Bacterial Peritonitis
Type of the Article	Opinion 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)
<b>Compulsory</b> REVISION comments	<p><b>Authors wrote:</b> "Numerical variables were presented as mean and standard deviation (SD) and compared between the two groups utilizing Student's t-test"</p> <p><b>My question is if the quantitative variables were analyzed by Kolmogorov-Smirnov or Shapiro-Wilk test for normality? Parametrical tests (such as Student's t-test) should be used only if variables follow the normal distribution, otherwise non-parametrical test should be performed instead (Mann-Whitney U-test)</b></p>	
<b>Minor</b> REVISION comments	<p>The authors focused on two quantitative parameters as markers for quick, cheap, and applicable markers of the response of treatment in SBP patients. Looking at Table 3, they might be also used for preliminary diagnosis of SBP (I do realize that definition of SBP is based on ascitic fluid laboratory examinations, still I believe those results could be used as a suspicion of SBP).</p> <p>NLR is one of the morphology-based indices. There can be found in the literature: NLR, PLR (platelet-to-lymphocyte ratio), LMR (lymphocyte-to-monocyte ratio), and NMR (neutrophil-to-monocyte ratio). According to the different studies, the morphology-derived markers that were the most accurate varied. Maybe it would be a good idea to continue studying that database and check if there is the superiority of NLR over the remaining morphology-related markers. I do realize that all morphology-related markers were described for the first time as markers of inflammation or as predictors in neoplastic diseases – that means the results from SBP may give different results than from any inflammatory disease, bacterial or viral diseases and finally in bacterial disease (with SBP is for sure) in liver cirrhosis.</p> <p>The list of interesting articles that could enrich the study:</p> <ul style="list-style-type: none"> <li>• Cai, Y.J.; Dong, J.J.; Dong, J.Z.; Yang, N.B.; Song, M.; Wang, Y.Q.; Chen, Y.P.; Lin, Z.; Shi, K.Q. Neutrophil-lymphocyte ratio predicts hospital-acquired bacterial infections in decompensated cirrhosis. Clin. Chim. Acta 2017, 469, 201–207</li> <li>• Qi, X. Peripheral Blood Lymphocyte-to-Monocyte Ratio Predicts Mortality in Patients with HBV-Related Decompensated Cirrhosis. Clin. Lab. 2019, 65</li> <li>• Jamil, Z.; Durrani, A.A. Assessing the outcome of patients with liver cirrhosis during hospital stay: A comparison of lymphocyte/monocyte ratio with MELD and Child-Pugh scores. Turk. J. Gastroenterol. 2018, 29, 308–315</li> <li>• Cai, Y.J.; Dong, J.J.; Dong, J.Z.; Chen, Y.; Lin, Z.; Song, M.; Wang, Y.Q.; Chen, Y.P.; Shi, K.Q.; Zhou, M.T. A nomogram for predicting prognostic value of inflammatory response biomarkers in decompensated cirrhotic patients without acute-on-chronic liver failure. Aliment. Pharmacol. Ther. 2017, 45, 1413–1426</li> </ul> <p>And some more historical articles to see the beginning of morphology-based indices and their clinical significance:</p> <ul style="list-style-type: none"> <li>• Zahorec, R. Ratio of neutrophil to lymphocyte counts-rapid and simple parameter of systemic inflammation and stress in critically ill. Bratisl. Lek. Listy 2001, 102, 5–14.</li> <li>• Merekoulias, G.; Alexopoulos, E.C.; Belezos, T.; Panagiotopoulou, E.; Jelastopulu, D.M. Lymphocyte to monocyte ratio as a screening tool for influenza. PLoS Curr. 2010, 2, RRN1154</li> </ul>	

Did the variables follow :[1d]Comment  
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1 ?the data



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	<ul style="list-style-type: none"> <li>Turkmen, K.; Erdur, F.H.; Ozcicek, F.; Ozcicek, A.; Akbas, E.M.; Ozbicer, A.; Demirtas, L.; Turk, S.; Tonbul, H.Z. Platelet-to-lymphocyte ratio better predicts inflammation than neutrophil-to-lymphocyte ratio in end-stage renal disease patients. Hemodial. Int. 2013, 17, 391–396</li> </ul>	
<b>Optional/General</b> comments	I find this article important and up to date. The authors focused on one of liver cirrhosis complications which can lead to a patient's death if not treated. A non-invasive method to assess the treatment efficacy is important.	

**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)
<b>Are there ethical issues in this manuscript?</b>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

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