



SDI Review Form 1.6

Journal Name:	International Blood Research & Reviews
Manuscript Number:	Ms_IBRR_48289
Title of the Manuscript:	IRON DEFICIENCY ANAEMIA OF UNKNOWN CAUSE – A CASE REPORT
Type of the Article	CASE REPORT

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>)

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)
Compulsory REVISION comments	<p>I think this is a typical case of iron deficiency anemia in a 16 years old girl. The main causes of anemia in such cases are the poor nutrition and the blood loss due to menstruation. The interesting of the case is that the diagnosis performed from an oral physician.</p> <p>In the table with her laboratory findings , the ferritin level is mentioned twice , 1,5 and 1ng/ml .Are the Reticulocytes corrected? They are not low for her haemoglobin level. Furthermore , Total iron binding capacity is low . Could the authors explain it?</p> <p>TIBC is increased in iron deficiency anemia.</p> <p>B thalassemia triats ? or trait? When someone has iron deficiency anemia, the physician first ought to treat iron deficiency and secondly ask for thalassemia trait because when there is iron deficiency , HbA2 is also low.</p>	<p>Thank you for the appreciation sir. Corrections have been made in the manuscript accordingly.</p> <p>As the values of reticulocyte count and Total iron binding capacity were normal and low respectively, based on all other lab investigations and her oral manifestations, the case was diagnosed as Iron deficiency anaemia of unknown cause.</p> <p>As the close differential for iron deficiency is Thalassemia trait , the patient was subjected to electrophoresis which revealed normal HbF,HbA1,HbA2 levels and lateral skull and hand wrist radiographs were also taken which revealed no abnormality.</p>
Minor REVISION comments		
Optional/General comments		

PART 2:

	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)
Are there ethical issues in this manuscript?	(If yes, Kindly please write down the ethical issues here in details)	