



SDI Review Form 1.6

Journal Name:	Asian Journal of Pediatric Research
Manuscript Number:	Ms_AJPR_47044
Title of the Manuscript:	Management of Paediatric Pain: How knowledgeable are Healthcare Providers at a Tertiary Centre, Southern 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>)

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	There is no questions or comments about post-operative pain. What about opioids use in that context? Is there a cultural reason for such a low use of medication? What about incidence of chronic pain? with such a low rate of administration of potent analgesics, what about the chronicisation of pain?	- Even though post operative pain was not singled out in the present survey, studies exploring its practice in Nigeria showed that the use of morphine was practically nonexistent as commonly used postoperative analgesia included paracetamol, NSAIDs, tramadol and pentazocine. - Problems of unavailability, high cost, fear of serious adverse effects, in particular respiratory depression, masking symptoms, addiction and analgesic abuse by parents have been pointed out as reasons for low use of morphine in several studies in Nigeria. - However, cultural reasons as well as chronification of pain should be explored in future studies, looking at the implication of poorly treated pain in our paediatric patients
Minor REVISION comments	The discussion is more of a review of pain treatment in children rather than focus on the data. It could be condensed as the general knowledge on pediatric pain part and more focused on explanation for why such a low use besides the sole explanation of education and awareness. In the discussion, comments on differences about nurses and physicians would be interesting. More data about hospital admission, type of surgery, and number of beds, etc, would be welcomed to better put in perspective the data.	- These comments are noted and had been addressed
Optional/General comments	From an North America perspective, it seems that Nigerian has a long way to go	- Nigeria has indeed a long way to go concerning pain management, especially in children who are frequently subjected to unnecessary pain

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) No, except from the children point of view (unnecessary pain)	