



SDI Review Form 1.6

Journal Name:	International Neuropsychiatric Disease Journal
Manuscript Number:	Ms_INDJ_47810
Title of the Manuscript:	DEMOGRAPHIC AND CLINICAL PROFILE OF PATIENTS RECEIVING ELECTROCONVULSIVE THERAPY AT A LAGOS PSYCHIATRY HOSPITAL.
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	<p>Conclusion should be linked to the patients studied.</p> <ul style="list-style-type: none"> - Data provided are related to the general population, but not over the specific group of studied patients. - Some graph or visual information might be provided. 	We want to thank the reviewer for the observations. Attempts have been made in the text to address the issues.
Minor REVISION comments	Spaces and names in the text corrected with track changes.	Noted sir
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)	