



SDI Review Form 1.6

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_51055
Title of the Manuscript:	Epidemiology and resistance levels Enterobacteriaceae isolates from urinary tract infections expressed as Multiple Antibiotic Resistance (MAR) Indices
Type of the Article	Short communication

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>)



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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)
Compulsory REVISION comments	<p>1.80 % UTI is due to E.Coli .serotypes- O,K,H(there are 1650 strains of E.Coli).<u>E.Coli&proteus with their fimbriae or pili</u> get attached to epithelial cells to produce IL6&IL8 causes epithelial cell desquamation. E.Coli produces-</p> <p>2.hemolysin&aerobacin (a siderophase for scavenging iron) to produce aneamia.</p> <p>3. Klebsiella with extra cellular slime & polysaccharides to form stones.</p> <p>4. coagulase negative staphylococcus saprophyticus causes asymptomatic UTI in young females.</p> <p>5. enterococcus causes uncomplicated cystitis in women.</p> <p>a.staphylococcus aureus from urine indicates bacteremia & infection of kidney1.Neisseria gonorrhoea (30 %).</p> <p>b.herpex simplex in urethra.</p> <p>c.genital urethral warts.</p> <p>d.chlamydia urethritis (40 %).</p> <p>d.urea plasma (10 %).</p> <p>e.mycoplasma.</p> <p>f.adenovirus cystis-heamaturia.</p> <p>g.cytomagalovirus from urine.</p> <p><u>h.candida from diabetes mellitus patients.</u></p> <p>i. mycobacterium in genitourinary TB</p> <p>6. 1.retro -grade infection from anal region to urethra-bladder-kidney.</p> <p>2.anus to vaginal interoitus to produce bacterial vaginosis-urethritis-paraurethral glands (skenitis)</p> <p>retrograde spread to Bladder & kidney.</p> <p><u>3.saprophytes in the interoitus of external genitalia are : diphtheroids,strepto,staphylo and H2O2 producing lactobacilli.</u></p> <p><u>The above mentioned organisms should have been studied in 10 yrs of study and further more complications.</u></p>	<p>Thank you for your valuable comments.</p> <p>The main aim of this manuscript was to study the resistance trends and epidemiology of Enterobacteriaceae in UTIs, that is why other pathogens (Enterococcus, Staphylococcus, non-fermenting Gram-negatives, Candida, Mycoplasma/Ureaplasma) were not included in this report. Also, this report is a short communication, focusing on Enterobacteriaceae.</p> <p>The introduction section of the paper was complemented, focusing more on the relevant pathogens in the study.</p> <p>Clinical data was not studied in this report, only resistance trends and epidemiology.</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?	<u>(If yes, Kindly please write down the ethical issues here in details)</u>	