



SDI Review Form 1.6

Journal Name:	Asian Journal of Pregnancy and Childbirth
Manuscript Number:	Ms_AJPCB_50675
Title of the Manuscript:	An Unusual Cause of Antepartum Haemorrhage
Type of the Article	Case study

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>This is a case report of cervical cervicitis misdiagnosed clinically as cervical cancer in a patient who had been admitted with premature contractions. A cesarean delivery was effected. The case write up with literature review and discussion are well articulated and the sentences are grammatically correct. The conclusion and references are well written.</p> <ol style="list-style-type: none"> Abstract: This should be revised so as to indicate the exact contents without being vague. Introduction ; This is rather long- it would be good to quote the low incidence of local cervical causes presenting as APH in the general population and chronic cervicitis is one such pathology and they rarely bleed heavily for intervention. The clinical diagnosis of cervical cancer (presenting as cauliflower growth ' is subjective and generally a biopsy is done and managed conservatively awaiting urgent HPE so as to design the management plan. This point is not well illustrated. It would be wise to justify the urgent caesarean delivery based on per vaginal bleeding (400mls blood loss may not lead to life threatening deterioration of the mother.). Should the indication be for preterm labour in twins , this should be justified. Some elaboration is needed as to the type of incision made on the uterus for caesarean delivery. If cervical cancer is confirmed (hence the need to get a biopsy report ASAP), there must be planned delivery with possible classical section and radical hysterectomy with pelvic lymphadenectomy at the same sitting in early disease. Make a note if this patient ever had a pap smear done as part of routine screening. Discussion; This is reasonably well written. References are complete and formatting is acceptable. 	



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Minor REVISION comments	As noted	
Optional/General comments	This is an unusual reason for caesarean delivery. The indication for both caesrean delivery and type of incision on the uterus need to be clarified as the HPE came back as cervicitis. How was this received by the patient? Most case reports are written as short communications with less than 3-5 references.	

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?	<i>(If yes, Kindly please write down the ethical issues here in details)</i> A note on how the news was communicated to the patient is warranted as she would have been agitated when she needed emergency caesarean delivery and at the same time contend with a diagnosis if cancer of the cervix.	

Reviewer Details:

Name:	Sivalingam Nalliah
Department, University & Country	International Medical University, Malaysia