# **Review Form 3**

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_126648
Title of the Manuscript:	A Case Report of Linezolid Induced Sideroblastic Anemia
Type of the Article	Case report

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# **Review Form 3**

## **PART 1:** Review Comments

Compulsory REVISION comments	Reviewer's comment	Author's Feedback (Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.	Haematological abnormality and myelosuppression can rarely occur with several other anti TB drugs but Linezolid association with this condition is most important. Whenever a patient on reserve drugs for drug resistant TB develops refractory anaemia one must reconsider the regimen containing Linezolid and either reduce the dose of Linezolid or use drugs from replacement sequence.	
Is the title of the article suitable? (If not please suggest an alternative title)	"Linezolid-Induced Sideroblastic Anaemia: A Reversible but Overlooked Adverse Effect"	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	Longer Oral M/XDR -TB Regimen (Containing Linezolid) does not have Intensive and Continuation phases. Needs Deletion.	
Are subsections and structure of the manuscript appropriate?	You should give more insights into dose and duration of Linezolid association with myelosuppression.	
Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.	You have mentioned that Linezolid was discontinued in view of prolonged QTc and myelosuppression, but in fact Linezolid is not known as a culprit agent for causing prolonged QTc. So Clarify  Treatment regimen for DR-TB (Longer Oral regimen) is of 18-20 months, not 12-15 months as you have mentioned. Needs Correction	
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.	Additional recent reference: Lizapis K, Vrachiolias G, Spanoudakis E, Kotsianidis I. Vauolation of early erythroblasts with ring sideroblasts: a clue to the diagnosis of linezolid toxicity. Br J Haematol,2020,190(6):809.	
Minor REVISION comments		
Is the language/English quality of the article suitable for scholarly communications?	Yes	
Optional/General comments	Linezolid induced myelosuppression and sideroblastic anaemia is not rare especially in centres who are treating DR-TB cases (Nodal DR-TB centres). They frequently come across such complications and these patients are managed comprehensively by either reducing the dose of Linezolid or using drugs from replacement sequence.	

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## PART 2:

		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)	

# **Reviewer Details:**

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