

## Review Form 1.6

Journal Name:	<a href="#">Asian Journal of Medicine and Health</a>
Manuscript Number:	Ms_AJMAH_82130
Title of the Manuscript:	Diagnostic modalities of Tuberculosis- Then and Now
Type of the Article	Review 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:

(<https://www.journalajmah.com/index.php/AJMAH/editorial-policy> )

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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)
<b>Compulsory</b> REVISION comments	<b>I do not see the need for major revisions as the paper is well laid out and appears to be a well constructed review paper</b>	
<b>Minor</b> REVISION comments	<p>My comments/ suggestions are minor:</p> <p>a) Some of the English – would be worth re-editing, e.g. ‘The number of new TB case diagnosed and notified in 2020 was 5.8 million only which was 7.1 million in 2019 and 5.7-5.8 million observed earlier in 2009-2012’ should I believe be ‘The number of new TB cases diagnosed and notified in 2020 was 5.8 million, higher than 7.1 million in 2019 and 5.7-5.8 million per year between 2009 and 2012.’ In addition, e.g. ‘<i>BACTEC radiometric system</i>: It has been used for several for isolation of bacteria’ – I believe you missed out ‘years’</p> <p>b) You mention in the Introduction ‘WHO 2020 update recommended molecular assays as the initial test to diagnose TB instead of sputum smear microscopy due to high diagnostic accuracy of these assays’ – but you do not say how prevalent these tests are currently in LMICs to better direct your recommendations going forward</p> <p>c) Current tests for TB – how prevalent are these in LMICs and why, e.g. issues of cost, time for results, etc., building on the comments made to lay the foundation as to the need for new approaches, etc. This also applies to molecular testing/ immunological diagnosis which I imagine is the most expensive?</p> <p>d) Similarly the tests for LTBI</p> <p>e) Finally – you discuss new promising tests – are these only currently used/ being tested in high income countries – or is any ongoing activity in LMICs. I say this because I like your advice/ conclusions going forward especially as most TB is in LMICs and e.g. in sub-Saharan Africa see high rates of patients with both TB and HIV (certainly when compared with other continents) and the challenges this brings to diagnosis and patient management</p>	
<b>Optional/General</b> comments	None in addition to the above – except this paper should be published!	

### 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)
<b>Are there ethical issues in this manuscript?</b>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

### Reviewer Details:

Name:	<b>Brian Godman</b>
Department, University & Country	<b>Strathclyde University, UK</b>