

REVIEWER'S REPORT

Manuscript No.: IJAR- 56324

Title: Profil Épidémiologique et prise en charge de la dyslexie chez les enfants suivis en psychiatrie au CHU Mohamed VI de Marrakech,

Recommendation:

Accept after minor revision

Rating	Excel.	Good	Fair	Poor
Originality		✓,		
Techn. Quality		✓,		
Clarity	✓,			
Significance	✓,			

Reviewer Name: Dr Abdul Haseeb Mir

Detailed Reviewer's Report

The article titled "Epidemiological Profile and Management of Dyslexia in Children Followed in Child Psychiatry at the Mohamed VI University Hospital in Marrakech" provides a vital clinical snapshot of learning disabilities within the Moroccan healthcare context. By conducting a retrospective descriptive study of 65 children and adolescents between 2021 and 2025, the research offers essential data on the demographic and clinical characteristics of dyslexia. One of the primary strengths of this paper is its thorough documentation of comorbidities, revealing that a staggering 78% of dyslexic patients also suffer from dysorthographia, followed by significant rates of dyscalculia and dysgraphia. This holistic view of neurodevelopmental disorders is commendable as it moves beyond a narrow focus on reading to address the multifaceted challenges these children face. Furthermore, the study identifies important early markers, such as language delays in 42% of the cases, providing clinicians with clear "red flags" for early intervention. The inclusion of the therapeutic pathway, specifically the reliance on speech therapy and psychomotor support, adds a practical dimension that is highly relevant for public health planning in North Africa.

However, the manuscript exhibits several weaknesses that should be addressed to enhance its scholarly depth and global applicability. The first notable weakness is the lack of a standardized diagnostic battery across the entire sample. While the study mentions that diagnosis was clinical and supported by speech therapy assessments, it does not specify which standardized tests (such as the L'ALOUETTE or local adaptations) were used to measure reading age or phonological awareness. This lack of psychometric detail makes it difficult to compare the severity of dyslexia in this cohort with international benchmarks.

REVIEWER'S REPORT

Without standardized data, the "epidemiological profile" remains somewhat subjective and tied to the specific practices of a single hospital unit.

A second weakness is the insufficient exploration of the socio-economic factors influencing the "Prise en charge" (management). The article notes that 58.7% of the children come from a medium socio-economic background, but it does not adequately analyze how financial constraints or parental education levels impacted the frequency or success of the speech therapy sessions. Given that speech therapy in Morocco is often a private expense or limited in public hospitals, a more detailed discussion on the barriers to treatment adherence would have provided a much stronger "public health" argument for the paper.

Furthermore, the research does not delve into the outcomes of the prescribed treatments. While the modalities of care are listed, there is no longitudinal data or follow-up assessment to show whether the multidisciplinary approach at CHU Mohamed VI led to a measurable improvement in the children's academic performance or psychological well-being. Adding even a small subset of "post-intervention" data would significantly elevate the paper's impact from a descriptive report to a study of clinical efficacy.

Finally, the discussion regarding "psycho-affective disorders" is underdeveloped. The abstract mentions that dyslexia can lead to psychological troubles, but the body of the text provides limited data on the prevalence of anxiety, depression, or self-esteem issues within this specific group of 65 children. Strengthening this section would better justify why these children are being followed in a child psychiatry unit rather than a standard pedagogical center.

Recommendation for the Editor

I recommend this article for final publication with minor revisions. The work addresses a critical gap in local epidemiological data and highlights the complex reality of neurodevelopmental care in Morocco. By providing more specific diagnostic details and a deeper analysis of the barriers to care, the author will offer an invaluable resource for both clinicians and educational policymakers. The research is grounded in real-world clinical practice, and its publication will contribute significantly to the improvement of care for dyslexic children in the region.