

REVIEWER'S REPORT

Manuscript No.: IJAR-59430

Title: Valeur d'orientation de la leucopénie de la thrombopénie et de la cytolyse hépatique dans le diagnostic différentiel de la dengue et du paludisme en Mauritanie.

Recommendation:

Accept as it is

Accept after minor revision...

Accept after major revision

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality		Good		
Techn. Quality	Excellent			
Clarity		Good		
Significance	Excellent			

Reviewer's ID: Dr. Sumathi

Detailed Reviewer's Report

1. In the context of Mauritania, where both dengue fever and malaria (specifically *Plasmodium falciparum* and *Plasmodium vivax*) are co-endemic and present with overlapping acute febrile symptoms, routine biological markers serve as critical triage tools.
2. Dengue fever (an arbovirus transmitted by *Aedes* mosquitoes) and malaria (primarily caused by *Plasmodium falciparum*, transmitted by *Anopheles* mosquitoes) are endemic, creating a frequent clinical dilemma. Because they share similar initial symptoms like acute fever, headaches, and arthralgia, routine laboratory parameters serve as vital orientation markers before specific diagnostic tests (like PCR, rapid diagnostic tests, or blood smears) are completed.
3. Valeur d'orientation translates to guideline value, orientational threshold, or reference range/cutoff value. Leucopénie means leukopenia (low white blood cell count), and thrombopénie means thrombocytopenia (low blood platelet count)

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

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- 4. Cytolyse hépatique is translated as hepatic cytolysis or hepatocellular injury / cytolytic hepatitis, characterized clinically by a predominant elevation of serum transaminases (ALT and AST) relative to alkaline phosphatase.**
- 5. Dengue fever and malaria are both mosquito-borne diseases present in Mauritania, though they are caused by different pathogens and have distinct transmission patterns.**
- 6. Key words must be given.**
- 7. Abstract Should be given.**
- 8. Result part can be given graphs for values.**
- 9. Summary points also be included.**
- 10. References should be with alphabetical order.**
- 11. Some relevant pictures can be added.**
- 12. After those changes good to publish in your journal.**