



**SDI Review Form 1.6**

Journal Name:	<b><u>British Journal of Medicine and Medical Research</u></b>
Manuscript Number:	<b>Ms_BJMMR_31224</b>
Title of the Manuscript:	<b>Functional recovery and its predictors after sub-acute stroke rehabilitation in a Nigerian tertiary health facility</b>
Type of the Article	<b>Original Research Article</b>

**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>)



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**PART 1: Review Comments**

	<b>Reviewer's comment</b>	<b>Author's comment</b> <i>(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)</i>
<b>Compulsory</b> REVISION comments	<p>The authors present a prospective clinical study demonstrating that half of the stroke survivors achieved minimal clinically important difference (MCID) in their functional recovery after subacute rehabilitation, and that motor impairment of the right side of the body predicted MCID. The study is potentially interesting but can be improved if the following considerations are addressed:</p> <ol style="list-style-type: none"> <li>1. Due to the small size of the study (n=30) the title should clearly mentioned "preliminary findings"</li> <li>2. The topography of cerebral stroke should be clarified</li> <li>3. It would be necessary to include data on multiple neurological symptoms in the study population. Minor revision of the English language would be suitable</li> </ol>	
<b>Minor</b> REVISION comments	<ol style="list-style-type: none"> <li>4. Change "infarctive" by "ischemic stroke" (tables 1 and 4 and text)</li> <li>5. Change "alpha" by "p" in Analysis</li> <li>6. Lacunar infarcts are the stroke subtype with a better functional prognosis (BMC Neurol 2010; May 18;10:31). Authors should indicate whether the presence of a lacunar stroke is a predictor of minimal clinically important</li> </ol>	



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	<p>differences.</p> <p>7. Authors may add, within the text, that a future line of research could be the influence of mild cognitive impairment on functional recovery of acute stroke. This would be important because mild cognitive impairment is an essential clinical feature of acute stroke, mainly in small vessel subcortical infarcts (Expert Rev Neurother 2009; 9: 1201-1217). Add and comment the reference.</p>	
<b><u>Optional/General</u></b> comments		

**Reviewer Details:**

Name:	<b><i>Adrià Arboix</i></b>
Department, University & Country	<b><i>Department of Neurology, Hospital Sagrat Cor, University of Barcelona, Barcelona, Catalonia, Spain</i></b>