



**SDI Review Form 1.6**

Journal Name:	<b><u>British Journal of Medicine and Medical Research</u></b>
Manuscript Number:	<b>Ms_BJMMR_20265</b>
Title of the Manuscript:	<b>An assessment of the benefit of surgical face masks in preventing aerosol droplet spread during a simulated spinal anaesthetic-a blinded in vitro study.</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>)



SDI Review Form 1.6

**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>This is an interesting, yet simple study, on a very relevant concern – anesthetic/operative-associated infections. Appropriate environmental controls are used.</p> <p>However, there are many more references on the risks of airborne infection, associated with human exhalation flows – the authors need to present a more thorough literature review to put their study in a better context – some of the primary literature is cited in these two articles:</p> <p>Tang JW. Investigating the airborne transmission pathway - different approaches with the same objectives. Indoor Air. 2015 Apr;25(2):119-24. doi: 10.1111/ina.12175.</p> <p>Tang JW, Li Y, Eames I, Chan PK, Ridgway GL. Factors involved in the aerosol transmission of infection and control of ventilation in healthcare premises. J Hosp Infect. 2006 Oct;64(2):100-14.</p> <p>The authors should cite the primary articles rather than just these reviews, in both their Introduction and Discussion sections.</p>	
<b>Minor</b> REVISION comments		
<b>Optional/General</b> comments	<p>Can the theatre staff use N95 masks during the invasive procedures involved with spinal anesthetic?</p> <p>A comment here on this option would be useful to promote further research in this area. Although N95 masks are more expensive, several studies have shown that they are more efficient in containing human exhaled airflows which carry infectious agents away from the mouth and nose:</p> <p>Tang JW, Liebner TJ, Craven BA, Settles GS. A schlieren optical study of the</p>	



**SDI Review Form 1.6**

	<p>human cough with and without wearing masks for aerosol infection control. J R Soc Interface. 2009 Dec 6;6 Suppl 6:S727-36. doi: 10.1098/rsif.2009.0295.focus.</p> <p>Tang JW, Nicolle AD, Pantelic J, Jiang M, Sekhr C, Cheong DK, Tham KW. Qualitative real-time schlieren and shadowgraph imaging of human exhaled airflows: an aid to aerosol infection control. PLoS One. 2011;6(6):e21392. doi: 10.1371/journal.pone.0021392.</p> <p>Tang JW, Settles G. Images in clinical medicine. Coughing and masks. N Engl J Med. 2009 Dec 24;361(26):e62. doi: 10.1056/NEJMicm0904279.</p> <p>The authors may want to highlight this as a potential cost-effective intervention – the cost of using N95 masks may be more than compensated for by the reduction in anesthetic related cases of meningitis or other peri-operative infections due to exhaled infectious agents from healthcare workers.</p>	
--	---	--

**Reviewer Details:**

Name:	<b>Anonymous</b>
Department, University & Country	<b>University of Alberta Hospital, Canada</b>