

## REPLY TO REVIEWER'S COMMENTS

**NUMBER ID:** 02581873/66150

**PUBLICATION NAME:** World Journal of Clinical Pediatrics

**Title**

The prevalence of Intellectual Disability in India: A meta-analysis.

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Dear Editor:

Many thanks for the review report and suggestions by the reviewer as well as the Editor. The peer-suggestions have helped us improve the scientific quality and clarity of the manuscript for the readership. We have clarified all the queries and have incorporated these ideas in our revised manuscript. The grammar and language has been reviewed by a native English-speaking colleague as well.

Best regards.

Professor Paul Swamidhas Sudhakar Russell

Corresponding Editor

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Reviewer #1:

**Scientific Quality:** Grade A (Excellent)

**Language Quality:** Grade B (Minor language polishing)

**Conclusion:** Accept (General priority)

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**Specific Comments to Authors:** Thank you for the invitation to review the manuscript entitled, "The prevalence of Intellectual Disability in India: A meta-analysis." The authors aimed to establish the lifetime summary-prevalence ID for the past 60-year period in India. The value was 2% (adjusted prevalence=1.4%). The manuscript is well-written, technically sound with a robust methodology. I recommend acceptance for publication after a few corrections.

LITERATURE SEARCH 1. An “e” is missing at the “Cohran Library.” Should read Cochrane library.

**Thank you for your review and this correction. We have amended the revised version as:**

“...Methods

*Literature search*

*Two researchers (S.M.C and R.E) independently, electronically, searched for relevant published studies in the PubMed, Scopus, and Cochrane library for the past 60 years (January 1961 to December 2020). ...”*

**(Page: 8; Section: Methods; Subsection: Literature search)**

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RESULTS 2. Please replace “data bases” with “databases.”

**Many thanks for the correction. Our revised manuscript reads as:**

“... Results

*Totally we identified 290 studies from all the databases, and 19 studies (studies include [10-28] were included in the final meta-analysis. Thirteen studies were excluded as they had either age group above 18 years and ID prevalence could not be calculated, a setting other than community or school, or prevalence was studies in specific diseased populations....”*

**(Page: 10; Section: Results)**

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ATTACHED FILES 3. The attached IELTS certificate has expired.

Thank you for pointing out the error, a valid IELTS certificate (from 18/12/2020 for 2 years), given below, has been uploaded.

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5<sup>th</sup> May 2021

This is to certify that the English language for the article mentioned below has been edited by me, and I hold the International English Language Testing System (IELTS) certification for the language. The IELTS certificate is attached along with this Non-Native Speakers of English Editing Certificate.

**Name of Journal: World Journal of Clinical Pediatrics**

**Manuscript Number: 02581873**

**Title: Prevalence of Suicide among adolescents with Neuro Developmental Disorders: A meta-analysis.**

**Authors: Paul Swamidhas Sudhakar Russell, Merlin Thanka Jemi Alwin Nesh, Swetha Madhuri Chikkala, Yogendra Singh, Priya Mary Mammen, Sushila Russell, Richa Earnest, Shonima Aynipully Viswanathan, Satya Raj Shankar, Grace Rebekah**

Thanking you

Yours sincerely,

*V. Ashvini*

Dr. Ashvini Vengadavaradan

# IELTS™

## Test Report Form

ACADEMIC

**NOTE** Admission to undergraduate and post graduate courses should be based on the ACADEMIC Reading and Writing Modules.  
GENERAL TRAINING Reading and Writing Modules are not designed to test the full range of language skills required for academic purposes.  
It is recommended that the candidate's language ability as indicated in this Test Report Form be re-assessed after two years from the date of the test.

Centre Number

IN620

Date

05/DEC/2020

Candidate Number

086066

### Candidate Details

Family Name

VENGADAVARADAN

First Name

ASHVINI

Candidate ID

L6187581



Date of Birth

03/08/1991

Sex (M/F)

F

Scheme Code

Private Candidate

Country or Region of Origin

Country of Nationality

INDIA

First Language

TAMIL

### Test Results

Listening

8.5

Reading

9.0

Writing

7.0

Speaking

8.5

Overall Band Score

8.5

CEFR Level

C2

### Administrator Comments

Empty box for Administrator Comments

#### Centre stamp



#### Validation stamp



Administrator's Signature

Date

18/12/2020

Test Report Form Number

20IN086066VENA620A

**Science editor:** 1 Scientific quality: The manuscript describes a meta-analysis of the prevalence of intellectual disability in India. The topic is within the scope of the WJCP. (1) Classification: Grade A; (2) Summary of the Peer-Review Report: The manuscript is well-written, technically sound with a robust methodology. However, the questions raised by the reviewer should be answered; and (3) Format: There is 1 table and 4 figures. (4) References: A total of 33 references are cited, including 5 references published in the last 3 years.

(5) Self-cited references: There are 2 self-cited references. The self-referencing rates should be less than 10%. Please keep the reasonable self-citations that are closely related to the topic of the manuscript, and remove other improper self-citations. If the authors fail to address the critical issue of self-citation, the editing process of this manuscript will be terminated.

**Thank for the suggestion.**

- i. ***Out of the 2 self-cited references, one reference (old reference 3: Bhaumik S, Gangadharan S, Hiremath A, Russell PS. Psychological treatments in intellectual disability: the challenges of building a good evidence base. Br J Psychiatry. 2011;198:428-30. [doi: 10.1192/bjp.bp.110.085084. PMID: 21628703]) can be done-away with and has been removed from the article and reference section.***
  - ii. ***The second self-cited references (current reference 28: Arora NK, Nair MKC, Gulati S, Deshmukh V, Mohapatra A, Mishra D, Patel V, Pandey RM, Das BC, Divan G, Murthy GVS, Sharma TD, Sapra S, Aneja S, Juneja M, Reddy SK, Suman P, Mukherjee SB, Dasgupta R, Tudu P, Das MK, Bhutani VK, Durkin MS, Pinto-Martin J, Silberberg DH, Sagar R, Ahmed F, Babu N, Bavdekar S, Chandra V, Chaudhuri Z, Dada T, Dass R, Gourie-Devi M, Remadevi S, Gupta JC, Handa KK, Kalra V, Karande S, Konanki R, Kulkarni M, Kumar R, Maria A, Masoodi MA, Mehta M, Mohanty SK, Nair H, Natarajan P, Niswade AK, Prasad A, Rai SK, Russell PSS, Saxena R, Sharma S, Singh AK, Singh GB, Sumaraj L, Suresh S, Thakar A, Parthasarathy S, Vyas B, Panigrahi A, Saroch MK, Shukla R, Rao KVR, Silveira MP, Singh S, Vajaratkar V. Neurodevelopmental disorders in children aged 2-9 years: Population-based burden estimates across five regions in India. PLoS Med. 201824;15:e1002615. [doi: 10.1371/journal.pmed.1002615. PMID: 30040859; PMCID: PMC6057634]) is one of the papers included in the final meta-analysis and was not be removed.***
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(6) References recommend: The authors have the right to refuse to cite improper references recommended by peer reviewer(s), especially the references published by the peer reviewer(s) themselves. If the authors found the peer reviewer(s) request the authors to cite improper references published by themselves, please send the peer reviewer's ID number to the editorialoffice@wjgnet.com. The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately.

2 Language evaluation: Classification: Grade B. 3 Academic norms and rules: The authors provided the Biostatistics Review Certificate, and PRISMA 2009 Checklist. No academic misconduct was found in the Bing search.

**None.**

4 Supplementary comments: This is an invited manuscript. No financial support was obtained for the study. The topic has not previously been published in the WJCP. 5 Issues raised: (1) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor.

**Thank you for the suggestion.**

**We have uploaded the original pictures as PowerPoint figures, with the revised version of the article as follows, to enable further editing:**

Figure 1: PRISMA (Preferred Reporting Items for Systematic Reviews and Meta-Analyses) flow-chart for studies in the final meta-analysis.

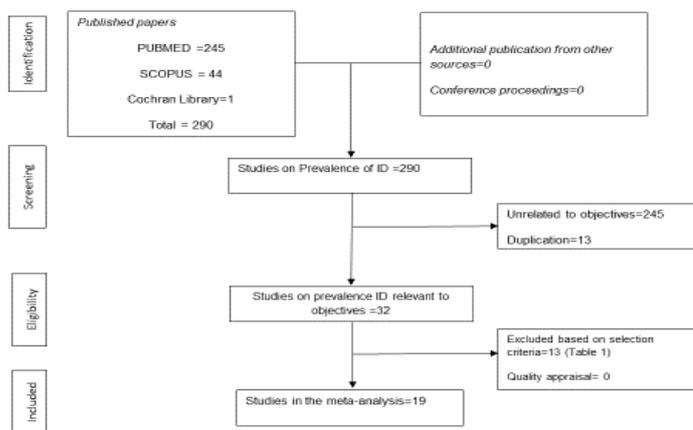


Figure 2: The contour-enhanced funnel plot (2A) and trim & fill plot (2B) for the publication bias.

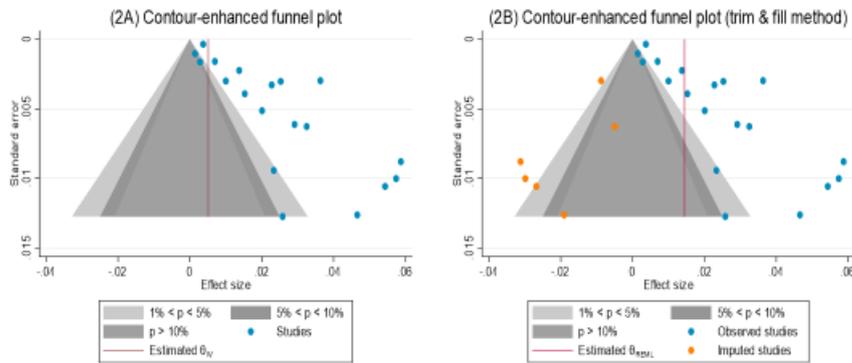
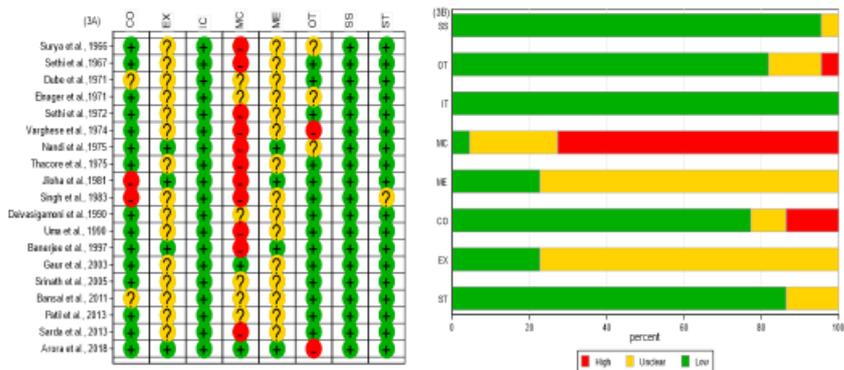
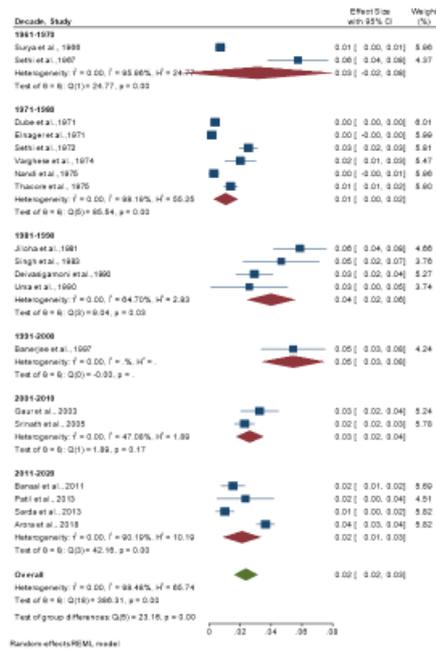


Figure 3: The Joanna Briggs Institute critical appraisal (JBI) for Prevalence meta-analysis for individual studies (3A) and average quality across studies (3B).



IC= were the criteria for inclusion in the sample clearly defined?  
 SS=were the study subjects and the setting described in detail?  
 EX=was the exposure measured in a valid and reliable way?  
 ME=were objective, standard criteria used for measurement of the condition?  
 CO=were confounding factors identified?  
 MC=were strategies to deal with confounding factors stated?  
 OT=were the outcomes measured in a valid and reliable way? ST=was appropriate statistical analysis used?  
 High =High bias, No=low bias, unclear=unclear bias, NA=Not applicable.

Figure 4: The forest plot for summary prevalence of prevalence of Intellectual Disability in India.



(2) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout.

Thank you for the suggestion.

- i. After an extensive search, we have revised our current 32 references and have added PMID and DOI wherever found missing and available as follows:

PMID & DOI available: 17

PMID only available: 5

DOI only available: 0

Both unavailable: 10

This is a 60-year longitudinal meta-analysis. Most of the references where both PMID & DOI were unavailable were the early studies in the 1960-1980; neither the publishing Journals nor the repositories have these bibliographic details.

Some of the articles are not indexed in PUBMED and PMID are not available. Old articles do not have DOI allocated to them.

ii. The names of all authors have been included in the references.

**(Page: 15-17; Section: Reference)**

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(3) The “Article Highlights” section is missing. Please add the “Article Highlights” section at the end of the main text.

**Thank you for the suggestion.**

**We have added the section “Articles Highlights” at the end of the main text as:**

“..... ARTICLE HIGHLIGHTS

***Research background***

*India is a country of more than a billion population and have significant disability burden like other low- and middle-income countries. The summary prevalence of Intellectual Disability (ID) in India was established.*

***Research motivation***

*Intellectual Disability contributes to 10.8% of the burden due to mental disorders in India. This national burden significantly contributes to the global burden of ID and hence one has to think globally and act locally to reduce this burden. At its best the collective prevalence of ID is in the form narrative review. There is an urgent need to document their summary prevalence of ID to enhance further policymaking, national programs and resource allocation.*

***Research objectives***

*The aim of the meta-analysis was to establish the summary prevalence of Intellectual Disability (ID) in India over a 60-year period was established.*

***Research methods***

*Nineteen studies were included in the meta-analysis following the PRISMA guidelines. To analyse the summary prevalence of ID, we used the Random Effects Model (REM) with arcsine square-root transformation. Heterogeneity of  $I^2 \geq 50\%$  was considered substantial and we explored the heterogeneity with meta-regression.*

### **Research results**

*The summary prevalence of ID was 2% (95%CI=2, 3%);  $I^2=98\%$ ] adjusted summary prevalence was 1.4%. Meta-regression demonstrated that age of the participants was statistically significantly related to the prevalence; other factors did not influence the prevalence or heterogeneity.*

### **Research conclusions**

*We established the summary prevalence of ID in India has been established as 2% taking in to consideration the individual prevalence studies over the last 6 decades. This knowledge should improve the existing disability and mental health policies, national programs and service delivery models to mitigate the burden related to Intellectual Disability....."*

**(Page: 13-14; Section: Articles Highlights)**

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**(2) Editorial office director:**

**(3) Company editor-in-chief:** I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Pediatrics, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

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