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REVIEWER'S REPORT

Manuscript No.: IJAR-55358

Title: A Comparative Study Based on Evaluation of Safety and Efficacy of Paracetamol and Mefenamic Acid in Children with Fever.,

Recommendation:

Accept as it is ……YES……

Accept after minor revision……

Accept after major revision ……

Do not accept (*Reasons below*) ……

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

Reviewer Name: PROF. DR DILLIP KUMAR MOHAPATRA

Detailed Reviewer's Report

Strengths

Relevant clinical topic

Fever management in children is a common and important paediatric issue.

Comparative design

Direct comparison of paracetamol and mefenamic acid adds practical value.

Prospective randomized study

The methodology is appropriate for the objective.

Clear outcome measures

Temperature reduction and adverse effects are clinically meaningful.

Sample size (n = 120)

Adequate for a single-center comparative study.

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Weaknesses / Points Needing Revision

Novelty is limited

Similar comparative studies already exist; authors must clearly state how this study adds new value (e.g., local population data, dosing pattern, safety profile).

Randomization details missing

Method of randomization and allocation concealment should be specified.

Ethical approval statement absent

IEC approval number and informed consent process must be mentioned.

Statistical analysis needs clarity

Specify exact statistical tests used.

Short follow-up duration

Only short-term antipyretic effect assessed; long-term safety not evaluated.

Language and formatting

Minor grammatical and stylistic corrections are needed.

Scientific Significance

Moderate

Useful for **regional / clinical practice journals**, especially in paediatrics or pharmacology.

Not suitable for **high-impact journals** due to limited novelty.

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Key Points

Clinical relevance:

Fever is a common paediatric symptom, and safe, effective antipyretic therapy is essential in children.

Study design:

A prospective, randomized, comparative clinical study was conducted in a tertiary care teaching hospital.

Study population:

The study included 120 children aged 1–14 years with documented fever (>99.5°F).

Interventions:

Participants were randomly assigned to receive either oral paracetamol (10–15 mg/kg) or oral mefenamic acid (4–8 mg/kg) at standard dosing intervals.

Outcome assessment:

Body temperature was measured at baseline and at 1, 4, and 6 hours after drug administration until normothermia was achieved.

Efficacy results:

Both paracetamol and mefenamic acid produced a statistically significant reduction in body temperature from baseline.

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Comparative efficacy:

Mefenamic acid showed a **slightly faster onset of antipyretic action**, though the difference was not statistically significant.

Safety profile:

Both drugs were generally well tolerated; **gastrointestinal discomfort was more frequent with mefenamic acid**.

Clinical implication:

Paracetamol remains a **safer first-line antipyretic**, particularly in children prone to gastrointestinal intolerance.

Overall conclusion:

Both drugs are effective antipyretics in children, but **drug selection should be individualized based on safety and tolerability**.