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Paper: “Practice of Mechanical Ventilation in the Intensive Care Unit of the Reference Hospital in Maradi: A Descriptive and Retrospective Study of the First Three Years of Activity”

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Peer review:

Reviewer 1: Julian Kraja
University of Shkodra “Luigj Gurakuqi”, Albania

Reviewer 2: Blinded

ESJ Manuscript Evaluation Form 2026

This form is designed to summarize the manuscript peer review that you have completed and to ensure that you have considered all appropriate criteria in your review. Your review should provide a clear statement, to the authors and editors, of the modifications necessary before the paper can be published or the specific reasons for rejection.

Please respond within the appointed time so that we can give the authors timely responses and feedback.

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Reviewer Name: Julian Kraja	
University/Country: University of Shkodra “Luigj Gurakuqi”, Albania	
Date Manuscript Received: 16. 02. 2026	Date Review Report Submitted: 17. 02. 2026
Manuscript Title: Practice of Mechanical Ventilation in the Intensive Care Unit of the Reference Hospital in Maradi	
ESJ Manuscript Number: 1210/25	
You agree your name is revealed to the author of the paper: Yes	
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Evaluation Criteria:

Please give each evaluation item a numeric rating on a 5-point scale, along with a thorough explanation for each point rating.

Questions	Rating Result [Poor] 1-5 [Excellent]
1. The title is clear and it is adequate to the content of the article.	3
<i>The title is self-explanatory, but I would recommend this title: “Practice and Outcomes of Mechanical Ventilation in a Resource-Limited Intensive Care Unit: A Three-Year Retrospective Study from Maradi, Niger”</i>	
2. The abstract presents objectives, methods, and results.	4
<i>The abstract is clear and structured, but I would recommend clarifying the abbreviations.</i>	
3. There are a few grammatical errors and spelling mistakes in this article.	3
<i>The introduction is well described, but the knowledge gap needs to be better specified.</i>	
4. The study methods are explained clearly.	3

<i>The study design cannot be cross-sectional. It can be replaced with a “retrospective descriptive cohort”</i>	
5. The results are clear and do not contain errors.	4
<i>The results are clear and there is a good logical flow. However, Mortality is reported but not stratified</i>	
6. The conclusions or summary are accurate and supported by the content.	4
<i>The conclusions are clear, coherent and practice-oriented, but it is a bit long. I would recommend only three points: 1. Staff training on ventilator management 2. Infection prevention packages for VAP 3. Equipment maintenance and NIV availability</i>	
7. The references are comprehensive and appropriate.	4
<i>References are mostly reliable. Some references are old, but the main thing is to standardize the references uniformly according to the specific style of the journal.</i>	

Overall Recommendation (mark an X with your recommendation) :

Accepted, no revision needed	
Accepted, minor revision needed	X
Return for major revision and resubmission	
Reject	

Comments and Suggestions to the Author(s):

This manuscript is scientifically valid, contextually relevant, and well-adapted to the realities of intensive care in low-resource settings. As for the improvements that need to be made, they are set out above. I wish the authors success for the beautiful work they have done.

Comments and Suggestions to the Editors Only: