

The term β -thalassemia intermedia (β -TI) is a term that describes patients with a form of milder anemia than β -thalassemia major. Ineffective erythropoiesis, chronic hemolytic anemia, and iron overload are the main factors responsible for prognosis the disease process in patients with β -TI. Chronic hemolytic anemia may have such adverse effects as result in increased in-gastrointestinal iron absorption and iron overload, which in turn can cause endocrine abnormalities, diabetes mellitus, osteoporosis, hypothyroidism, and hypogonadism. The options available for managing patients with β -TI include iron-iron chelation therapy, splenectomy, transfusion therapy, and modulation of fetal hemoglobin (HbF) production are several available options for managing patients with β -TI. Pharmacological agents that increase γ -globin production [e.g., like Hydroxyurea hydroxyurea (HU);], as evidenced by an increased in HbF levels, have been considered as therapeutic agents for patients with β -thalassemia TI. Increasing the synthesis of fetal hemoglobin HbF synthesis can help reduce anemia and, thereby, improve improving the clinical condition of these patients of patients with β -TI. In several patients with β -TI and in patients with sickle cell disease, a rise increases in total HbF levels during HU treatment has have been repeatedly reported during HU treatment in several patients with β -TI and in those with sickle-cell disease. HU treatment can reduce blood transfusion dependency and even make some patients transfusion free, increasing their energy state level and decreasing splenomegaly. HU treatment it also is protective protects for against hypothyroidism, pulmonary hypertension, extramedullary hematopoiesis, leg ulcers, and osteoporosis. The commonest most common side effects of HU therapy treatment include neutropenia and thrombocytopenia; both of which these are predictable and can be easily manageable managed. In the few studies conducted on the side effects of HU treatment in β -TI patients with β -TI, dermatological, neurological, and gastrointestinal adverse effects were have been seen observed without any reports of endocrine abnormality, bone marrow

Comment [A1]: Once an abbreviation is introduced in the text, the abbreviated form is used consistently at all subsequent mentions.

Comment [A2]: The pronoun "it" is used at this instance to avoid repeating the term "HU treatment" as the previous statement also pertains to HU treatment.

Comment [A3]: In academic writing, it is preferable to use consistent terminology so that concepts are clearly understood. The term "HU therapy" has been revised to "HU treatment" for consistency.

suppression, or hematological toxicity. ~~In the present study, We aimed to perform~~ medium- to long-term follow-up of chronic ~~low-dose HU treatment was inspected to for analyze~~ ~~analyzing the its~~ effect ~~of HU treatment~~ on the thyroid function of patients with β -TI.

Comment [A4]: Compound adjectives that modify a single noun are typically hyphenated, except when the first word of the adjective is an adverb ending with “-ly.” Hyphens are used with these terms so that their meaning is understood clearly.

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