

The paper has the purpose to contribute to knowledge enhancement in the field of mercury human exposure, caused by an anthropogenic source. This work essentially shows some relevance, in so far as it provides a study which aims at better understanding the potential impact of mercury, emitted by a steel plant in Bhilai, India, on human health and on the surrounding environment.

However, the scientific level of the paper is quite poor, with reference both to the results achieved and to the presentation of the work.

First of all, the number of subjects involved in the study and of samples analyzed is quite limited for this kind of study.

Moreover, the criteria used in the recruitment of the subjects should be more accurate, whereas more space in the paper should be devoted to describing them. The questionnaire prepared by the Authors properly included information on gender, age, occupation, health status, and time-activity pattern. However, in order to better assess the human internal load of mercury related to the presence of a steel plant, questions should be included on the number of amalgam fillings, on consumption, and on the frequency of consumption of various fishes, as well as on whether the subjects selected suffered from kidney disease, diabetes, or hypertension. Moreover, further inclusion criteria for Subjects Group 2 could be were living in township for at least the past year, and not working in the steel plant or in another mercury plant. The recruitment of subjects represents, in fact, one of the most critical factors to be born in mind in this kind of study.

As far as the urinary mercury analyses are concerned, urinary flow rate and hydration should be taken into account. With this in mind, the assessment of U-Hg as an index of body burden of inorganic mercury should focus on creatinine-corrected levels (U-HgC, or  $\mu\text{g Hg/g creatinine}$ ). Actually, because creatinine excretion depends on urinary flow rate at very high or very low rates, subjects with extreme creatinine concentrations (i.e.,  $<0.3 \text{ g/L}$  or  $>3 \text{ g/L}$ ) should be excluded from some evaluations based on creatinine-corrected levels.

Some minor remarks:

1. Please make the references cited in the text consistent.
2. Please convert Mg and Tg to a more conventional units of measurement.
3. Please convert "feet" to the International Standard Unit.
4. Please check  $\mu\text{g}\cdot\text{L}^{-1}$  and the other units of measurement present in the text and change to  $\mu\text{g L}^{-1}$ .

Overall, the entire manuscript needs revising in the form and in the presentation style.