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## REVIEWER'S REPORT

Manuscript No.: IJAR- 50313

Date: 17/02/2025

Title: "THE NASAL SEPTUM HEMANGIOMA: A CASE REPORT"

### Recommendation:

- ✓ Accept as it is .....
- 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: Dr. S. K. Nath

Date: 18/02/2025

### Reviewer's Comment for Publication.

The paper is clinically relevant and provides an interesting case of a rare nasal hemangioma. Some language refinement and expanded discussion on histopathology and treatment outcomes would enhance its impact. It is well-structured and informative, but minor revisions could improve clarity and scientific rigor.

## Reviewer's Comment / Report

### Strengths of the Paper:

- 1. Clear Case Presentation:** The case is well-documented, with a thorough clinical history and diagnostic process. The use of rhinoscopy, nasofibroscope, and CT imaging strengthens the diagnostic approach.
- 2. Well-Structured Format:** The paper follows a logical structure (Abstract, Introduction, Case Report, Discussion, and Conclusion). Key points are presented concisely.
- 3. Relevant Discussion:** The discussion highlights the rarity of nasal septum hemangiomas. It provides insights into possible etiological factors (trauma, hormonal influences). The paper emphasizes the importance of clinical and radiological diagnosis.
- 4. Appropriate References:** The bibliography includes key sources on nasal hemangiomas. Studies on pediatric and adult cases are cited.

### Areas for Improvement:

- 1. Language & Grammar Issues:** Some sentences have awkward phrasing and grammatical errors. For example:  
 "The nasal hemangiomas localization is believed to be rare..."  
 Could be revised to: "Nasal hemangiomas are considered rare..."

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“The most common clinical manifestation is recurrent epistaxis and nasal obstruction over a clinically identifiable mass.”

Could be revised to: “The most common clinical manifestations are recurrent epistaxis and nasal obstruction associated with a clinically identifiable mass.”

**2. Lack of Histopathological Details:** The classification of hemangiomas is mentioned in the introduction, but the case lacks specific histopathological findings after excision. A brief discussion on microscopic features of the excised mass would add value.

**3. Figure References Need Clarification:** The text mentions Figures 1, 2, and 4, but the actual images are not included in the provided content. If figures are part of the full paper, clearer descriptions in the captions would improve understanding.

**4. More Discussion on Treatment & Prognosis:** While endonasal surgery is noted as effective, additional discussion on post-operative follow-up, recurrence risk, and patient outcome would strengthen the conclusion. Did the patient have any follow-up imaging or symptoms recurrence?