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REVIEWER'S REPORT

Manuscript No.: IJAR-56428

Title: Placenta Accreta Spectrum in an Unscarred Uterus: A Rare and Unexpected Obstetric Emergency

Recommendation:

Accept as it is

Accept after minor revision.....

Accept after major revision

Do not accept (*Reasons below*)

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

Reviewer's ID: Dr. Sumathi

Detailed Reviewer's Report

- 1. Placenta Accreta Spectrum (PAS) is a serious pregnancy complication where the placenta grows too deeply into the uterine wall, failing to separate at delivery and causing severe, life-threatening hemorrhage. It is primarily caused by scarring from previous cesarean deliveries, often combined with placenta previa. Treatment usually requires a planned cesarean hysterectomy.**
- 2. Rupture of an unscarred uterus is a rare (approx. 0.8 in 10,000 deliveries) but life-threatening obstetric emergency occurring when the uterine wall tears without prior surgery. It often presents with sudden abdominal pain, fetal distress, or hypovolemic shock. Risk factors include prolonged labor, excessive uterine stimulants, uterine abnormalities, or trauma.**
- 3. Primigravida refers to a woman pregnant for the first time (G1), while Primipara (or primip) describes a woman who has completed one pregnancy resulting in a birth after 20 weeks gestation (P1). The key distinction is status: a primigravida is currently pregnant (or was pregnant) for the first time, whereas a primipara has already**

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delivered once, marking the end of her first pregnancy and beginning of her first delivery record.

4. Conservative management is a non-surgical, non-invasive approach to treating injuries or diseases (such as musculoskeletal pain or kidney failure) by focusing on symptom relief, pain control, and rehabilitation to avoid risks associated with surgery. It includes physical therapy, medication, lifestyle changes, and monitoring, aimed at maintaining function and improving quality of life.
5. Conservative management is defined by all non-invasive procedures (i.e. surgery). Your consultant may offer a watch and wait approach to see how you manage or to monitor how your condition progresses. You may be advised to take analgesia (pain medication) or offered physiotherapy/hydrotherapy.
6. An emergency C-section is an unplanned, rapid surgical delivery (often within 30 minutes) performed when the health of the mother or baby is at immediate risk. Key reasons include abnormal fetal heart rate, stalled labor, or placental issues. Risks include hemorrhage and infection, while recovery typically takes 6–8 weeks.
7. Typically, you're awake for a C-section. General anesthesia, which puts you in a sleep-like state, is usually only used during emergency C-sections. So, while you may feel a little sleepy from the pain medications, you should be relaxed and ready to see your beautiful baby as soon as they make their arrival.
8. Key words are good.
9. In result part tables can be made for values.
10. Pictures are awesome with significant points.
11. References should be in alphabetical order.
12. After those changes good to publish in your journal.