

REVIEWER'S REPORT

Manuscript No.: IJAR-56579

Title: THERAPEUTIC IMPACT OF NIDAN PARIVARJAN, AHAR, VIHAR AND SHAMAN CHIKITSA IN A CASE OF PROSTATOMEGALY (PAURUSH GRANTHI),

Recommendation:

Accept as it is

Accept after minor revision.....

Accept after major revisionYES.....

Do not accept (*Reasons below*)

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

Reviewer's ID: JPR-094

Detailed Reviewer's Report

1. Strengths of the Manuscript

Relevant Clinical Topic:

Prostatomegaly/BPH is a common condition among elderly men, and exploring alternative or integrative therapeutic approaches such as Ayurveda is clinically relevant.

Holistic Treatment Approach:

The manuscript presents a comprehensive Ayurvedic management protocol including **Nidan Parivarjan, Ahar, Vihar and Shaman Chikitsa**, reflecting classical Ayurvedic principles.

Integration of Modern and Ayurvedic Concepts:

The study attempts to correlate modern medical understanding of BPH with Ayurvedic concepts such as **Mutrakrichra, Mutraghata, and Vrishya Granthi**, which enhances interdisciplinary understanding.

Objective Diagnostic Evidence:

Use of **ultrasonography and PSA testing** provides objective clinical parameters to support the case description.

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Detailed Therapeutic Description:

The manuscript includes a clear description of prescribed medicines, ingredients, and their therapeutic properties, which improves reproducibility.

2. Weaknesses of the Manuscript

Single Case Study Limitation:

The study is based on **only one patient**, which severely limits the scientific validity and generalizability of the findings.

Insufficient Clinical Outcome Measures:

The manuscript does not use standardized clinical tools such as the **International Prostate Symptom Score (IPSS)** or validated quality-of-life scales.

Minimal Objective Improvement:

The reduction in prostate volume from **116 cc to 80 cc** and PVR reduction from **123 ml to 113 ml** is modest and may not be clinically significant.

Methodological Weakness:

There is no **control group, comparator therapy, or statistical analysis**, which limits the ability to establish causal treatment effects.

Incomplete Laboratory Data:

Important parameters such as **follow-up PSA levels, renal function tests, and uroflowmetry results** are not reported after treatment.

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Diet and Lifestyle Confounding:

The extremely strict **DIP diet, fasting, meditation, walking, and yoga** could independently influence patient health outcomes, making it difficult to attribute improvements solely to the Ayurvedic medicines.

Language and Formatting Issues:

Several grammatical errors, inconsistent terminology, and formatting issues are present throughout the manuscript.

Reference Quality Issues:

Some references are outdated or not directly related to the clinical aspects of BPH management.

3. Significance of the Study

The manuscript contributes to the growing interest in **integrative medicine and Ayurvedic management of urological disorders**. However, due to the **single-case design and limited objective evidence**, the scientific impact remains limited. The findings should be considered **preliminary observations rather than definitive evidence**.

4. Key Points for Improvement

Include **standardized symptom scoring systems** (e.g., IPSS).

Provide **complete pre- and post-treatment laboratory and imaging data**, including PSA follow-up.

Clarify the **timeline of treatment and follow-ups**.

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Improve **scientific language, grammar, and formatting.**

Strengthen the **discussion with comparison to previous studies.**

Address **diet and lifestyle as confounding factors.**

Provide clearer **figures and tables with proper labeling.**

Consider including **mechanistic explanations supported by modern pharmacological evidence.**

5. Recommendation

Recommendation: Major Revision

Although the manuscript addresses an interesting topic and presents a holistic Ayurvedic approach, the current version has **methodological limitations, incomplete clinical evidence, and presentation issues** that need substantial revision before it can be considered for publication.

Justification for Major Revision

1. Title Clarity

Issue:

The title combines multiple Ayurvedic concepts (Nidan Parivarjan, Ahar, Vihar, Shaman Chikitsa) but does not clearly indicate that the study is **a single case report**.

Justification:

For transparency and academic clarity, the title should explicitly state **"case report"** or **"case study"** so that readers understand the level of evidence.

2. Abstract Structure

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Issue:

The abstract lacks a **clear structured format** (Background, Objective, Methods, Results, Conclusion).

Justification:

Structured abstracts improve readability and allow readers to quickly understand the key findings and methodology.

3. Background Literature

Issue:

The introduction provides limited recent literature on benign prostatic hyperplasia.

Justification:

The manuscript should discuss recent studies on **Benign Prostatic Hyperplasia** to provide proper scientific context and justify the study.

4. Inadequate Epidemiological Context

Issue:

The manuscript does not present epidemiological data regarding prevalence or burden of prostatomegaly.

Justification:

Including prevalence data strengthens the rationale for exploring alternative therapeutic strategies.

5. Lack of Standard Clinical Assessment

Issue:

The study does not include validated symptom scoring systems such as the **International Prostate Symptom Score**.

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Justification:

Validated clinical tools are essential for objectively assessing symptom severity and treatment response.

6. Incomplete Patient History

Issue:

The manuscript provides limited information on the patient's **comorbidities, medication history, and duration of disease**.

Justification:

Detailed patient history is necessary to evaluate potential confounding factors affecting treatment outcomes.

7. Diagnostic Criteria Not Clearly Defined

Issue:

The diagnostic criteria used to confirm prostatomegaly are not fully explained.

Justification:

Clear diagnostic criteria based on imaging or clinical guidelines should be presented to ensure diagnostic accuracy.

8. Lack of Ethical Statement

Issue:

There is no clear mention of **patient consent or ethical approval**.

Justification:

Case reports should explicitly state that **informed consent was obtained** and that ethical standards were followed.

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9. Treatment Protocol Description

Issue:

Although the medicines are listed, the rationale behind each drug selection is not clearly explained.

Justification:

The therapeutic reasoning should be linked to classical Ayurvedic texts and pharmacological mechanisms.

10. Confounding Lifestyle Factors

Issue:

Multiple lifestyle interventions such as **diet modification, fasting, yoga, meditation, and walking** were implemented simultaneously.

Justification:

These factors could independently influence health outcomes, making it difficult to attribute improvements solely to the medicinal treatment.

11. Limited Objective Improvement

Issue:

The reported reduction in prostate volume and residual urine is relatively small.

Justification:

The manuscript does not explain whether the improvement is **clinically significant** or within normal measurement variability.

12. Lack of Statistical Evaluation

Issue:

No statistical analysis is presented.

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Justification:

Even in case reports, basic descriptive analysis or comparison with previous studies can strengthen interpretation.

13. Missing Follow-up Data

Issue:

Important follow-up parameters such as **PSA level, renal function tests, and uroflowmetry** are not reported after treatment.

Justification:

These parameters are important to assess treatment effectiveness and safety.

14. Weak Discussion Section

Issue:

The discussion does not adequately compare the findings with previous clinical studies.

Justification:

Scientific manuscripts should critically compare results with existing literature to highlight similarities or differences.

15. Mechanistic Explanation

Issue:

The manuscript lacks a clear explanation of the **pharmacological mechanism** of the Ayurvedic medicines used.

Justification:

Linking traditional medicine concepts with modern pharmacological evidence would strengthen scientific credibility.

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16. Language Quality

Issue:

The manuscript contains grammatical errors and inconsistent terminology.

Justification:

Professional language editing is necessary to improve clarity and readability.

17. Figure and Table Presentation

Issue:

Figures and tables are not clearly labeled or adequately described.

Justification:

Proper captions and labeling are necessary for readers to interpret the data accurately.

18. Reference Quality

Issue:

Several references are outdated or not directly related to the topic.

Justification:

Recent peer-reviewed references should be included to support the study's scientific claims.

Overall Recommendation

Decision: Major Revision Required

Justification:

The manuscript addresses a clinically relevant topic and presents an integrative Ayurvedic treatment approach. However, **methodological limitations, incomplete clinical data, insufficient discussion, and language issues** significantly reduce its scientific rigor. Substantial revisions are required before the manuscript can be considered for publication.

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