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REVIEWER'S REPORT

Manuscript No.:IJAR-56773

Title: When Inflammation Masks Anatomy: Bilateral Acute Uveitis Revealing Plateau Iris Syndrome with Severe Ocular Hypertension

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		Good		
Clarity	Excellent			
Significance	Excellent			

Reviewer's ID: Dr. Sumathi

Detailed Reviewer's Report

1. **Uveitis is a serious form of eye inflammation that affects the middle layer of the eye wall (uvea), often causing pain, redness, light sensitivity, and blurred vision. It is caused by autoimmune diseases, infections, or injury, and can lead to permanent vision loss if not treated promptly with steroids or immunosuppressants.**
2. **Uveitis is inflammation of the eye's middle layer (uvea), often caused by autoimmune diseases (lupus, sarcoidosis), infections (shingles, syphilis), eye injuries, or certain cancers. In many cases, the cause is unknown. It requires prompt treatment to avoid vision loss and is most common in adults aged 20-60.**
3. **Plateau iris syndrome is a form of angle-closure glaucoma where the peripheral iris is pushed forward by abnormally positioned ciliary processes, obstructing eye fluid drainage despite a patent peripheral iridotomy (PI). Common in younger patients, it features a narrow angle, a flat iris plane, and a characteristic "double-hump sign" on gonioscopy.**

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4. **Plateau iris treatment focuses on opening the drainage angle to lower eye pressure, typically beginning with laser peripheral iridotomy (LPI) to address pupillary block, followed by argon laser peripheral iridoplasty (ALPI) to shrink peripheral iris tissue. If these fail, cataract extraction or surgical interventions like trabeculectomy may be necessary.**
5. **Intraocular pressure (IOP) is the fluid pressure inside the eye, essential for maintaining its shape, with a normal range typically between 10 and 21 mm Hg. High IOP (ocular hypertension) occurs when fluid doesn't drain properly, acting as a major risk factor for glaucoma and potential optic nerve damage.**
6. **Corticosteroids are powerful, man-made anti-inflammatory drugs that mimic cortisol to treat conditions like asthma, arthritis, and skin diseases by suppressing immune responses. Commonly used types include prednisone, dexamethasone, and hydrocortisone, administered orally, injected, or topically. While highly effective, they carry risks of serious side effects, particularly with long-term use, such as bone thinning, infections, weight gain, and high blood pressure.**
7. **A diagnostic challenge involves complex, ambiguous, or rare cases where identifying the correct disease is difficult due to vague symptoms, limited testing, or cognitive biases. These challenges often stem from early-stage illnesses, misinterpretation of symptoms, or, in AI models, high false-negative rates. Addressing these requires enhanced communication, multidisciplinary reviews, and advanced, innovative diagnostic tools.**
8. **Systemic Lupus Erythematosus (Lupus) is frequently cited as one of the hardest diseases to diagnose, often called "The Great Imitator" because it affects multiple organ systems with widely varied symptoms that mimic other illnesses. Other notoriously difficult-to-diagnose conditions include Sjögren's syndrome, Celiac disease, Lyme disease, and Fibromyalgia, often due to vague symptoms and lack of a single, definitive test.**
9. **Dealing with a difficult diagnosis requires allowing yourself to feel emotions while actively managing your care. Key steps include educating yourself about the condition, assembling a strong support**

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team, adhering to treatment plans, and setting small, daily goals. Be patient with yourself, as coping is a process.

10. **Key words are given excellent.**
11. **Abstract is meaningful.**
12. **Some pictures can be given.**
13. **Result part should be clear with tables.**
14. **Summary points also be added.**
15. **References are not sufficient can be included with discussion points.**
16. **After that can be published in your journal.**