

REVIEWER'S REPORT

Manuscript No.: IJAR-57277

Title: Aspect atypique d'une rétention placentaire: à propos d'un cas.

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		Good		
Significance		Good		

Reviewer's ID: Dr. Sumathi

Detailed Reviewer's Report

1. Based on typical case reports, an atypical presentation of retained placenta often involves a delayed diagnosis, absence of immediate postpartum hemorrhage, or the simulation of other severe pathologies.
2. The most common reason for a retained placenta is not enough contractions in the uterus. Contractions can slow down or the uterus can have trouble contracting for different reasons.
3. A retained placenta occurs when all or part of the placenta remains in the uterus 30–60 minutes after childbirth, causing serious risks like postpartum hemorrhage and infection. Common causes include weak contractions, the placenta attaching too deeply (accreta), or the cervix closing too soon. Symptoms include heavy bleeding, severe pain, and fever. Treatment involves oxytocin, manual removal, or a D&C procedure.
4. Limbic-predominant age-related TDP-43 encephalopathy (LATE) is a common, slow-progressing form of dementia affecting people over 80, often mistaken for Alzheimer's. It involves TDP-43 protein buildup, causing memory loss and, currently, can only be definitively

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diagnosed via autopsy. It causes slower decline than Alzheimer's, typically focusing on memory.

5. Postpartum hemorrhage (PPH) is excessive bleeding after childbirth, typically defined as blood loss $\geq 1,000$ mL or hypovolemia signs within 24 hours (primary) or up to 12 weeks (secondary) postpartum. It is a leading cause of maternal mortality, often caused by uterine atony, and presents with heavy vaginal bleeding, dizziness, and low blood pressure. Treatment requires rapid medical intervention, including medications, uterine massage, or surgery.
6. Postpartum hemorrhage (PPH) is heavy, uncontrolled vaginal bleeding after childbirth, often occurring within 24 hours but possible up to 12 weeks later. Key signs include soaking through one or more pads per hour, passing large clots (larger than a golf ball), dizzy spells, rapid heart rate, pale/clammy skin, and a soft, "boggy" uterus.
7. Severe illnesses are conditions that are life-threatening, cause significant disability, or require intensive, long-term management, including chronic diseases like heart disease, cancer, stroke, and diabetes. These illnesses often involve serious organ damage, such as chronic kidney disease or COPD. Management typically requires ongoing medical care and often includes palliative support.
8. Key words must be given.
9. Pictures are good but should focus ore on result part with tables and graphs.
10. Summary points also be added.
11. References should be with alphabetical order.
12. After those changes good to publish in your journal.