



ISSN NO. 2320-5407

ISSN(O): 2320-5407 | ISSN(P): 3107-4928

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

Manuscript No.: IJAR-57554

Title: Tuberculosis and Adrenal Insufficiency: The Duo Continues to Reveal Secrets!

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

Detailed Reviewer's Report

Strength of the study

- The manuscript presents a rare and clinically important presentation of adrenal tuberculosis
- Detailed hormonal, radiological, and microbiological evaluation strengthens diagnostic accuracy
- CT and MRI findings are well described and supported with illustrative images
- Discussion effectively explains differential diagnosis and radiological staging
- Literature review is relevant and updated with recent references
- The case highlights the importance of multidisciplinary diagnostic assessment in endemic regions

Weakness of the study

- Single case report limits general applicability of findings
- Ethical clearance and patient consent are not clearly mentioned
- Functional follow up after treatment is briefly discussed only
- Some grammatical and formatting inconsistencies affect readability
- Discussion could include more comparison with similar reported cases
- Certain laboratory units and reference ranges appear inconsistent
- Figure legends and image quality could be improved for better interpretation

Reviewers Comments

The manuscript presents an informative and clinically relevant case of adrenal insufficiency secondary to multifocal tuberculosis with atypical adrenal imaging findings. The topic is important because isolated adrenal tuberculosis is rare and may mimic neoplastic adrenal lesions, creating diagnostic challenges. The case presentation is detailed and includes appropriate biochemical, radiological, and microbiological investigations. The CT and MRI descriptions on pages 2 to 4 provide useful educational value and support the diagnosis effectively. The discussion is well structured and explains the radiological progression and differential diagnosis of adrenal tuberculosis in a clear manner. The inclusion of recent references also strengthens the scientific context of the report. However, ethical clearance approval and patient consent for publication should be clearly mentioned in the manuscript. Minor grammatical and formatting corrections are needed to improve readability and presentation quality. Long term follow up and functional endocrine outcome after therapy could also be elaborated further. Overall, the manuscript contributes valuable clinical insight and is suitable for publication after moderate revision and careful language editing.