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REVIEWER'S REPORT

Manuscript No.: IJAR-57731

Title: The 180-Degree Clinical Chair Rotation Test in Normal Subjects and Patients with Various Peripheral Vestibular Abnormalities

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 study addresses an important and practical diagnostic issue in vestibular medicine
- Inclusion of both healthy controls and multiple vestibular disorders improves comparative analysis
- Use of portable video-oculography enhances clinical applicability and diagnostic relevance
- Statistical analysis and tabular presentation of findings are clear and understandable
- Ethical principles, informed consent, and conflict of interest declarations are appropriately included

Weakness of the study:

- The study was conducted at a single center which may limit wider applicability
- Some diagnostic subgroups had modest sample sizes affecting statistical strength
- Manual chair rotation may introduce variability compared with motorized systems
- Minor grammatical and formatting inconsistencies are present throughout the manuscript
- Inter-rater reliability and long term reproducibility assessments were not evaluated in the study

Reviewers Comments:

The manuscript presents an interesting and clinically useful study evaluating the role of a low cost 180-degree chair rotation test combined with video-oculography in peripheral vestibular disorders. The topic is relevant because conventional rotary chair systems are expensive and less accessible in many clinical settings. The methodology is clearly explained, and inclusion of both healthy volunteers and different vestibular disorders strengthens the study design. The findings related to post-rotatory nystagmus and VOR suppression provide valuable clinical insights, especially in vestibular migraine and BPPV patients. Tables, waveform illustrations, and comparative analyses improve readability and understanding of the results. Ethical considerations and informed consent procedures have been appropriately addressed. However, the manuscript requires minor improvement in grammar, formatting consistency, and sentence structure. Limitations including modest subgroup size, manual rotation variability, and absence of inter-rater reliability testing should be discussed further. Overall, the study contributes meaningful practical information for vestibular assessment in resource limited settings.

Previously Published anywhere/Plagiarism check:

There is no clear indication that this manuscript has been previously published elsewhere. The study appears to represent original observational clinical research supported by appropriate references and structured scientific presentation. However, plagiarism screening using standard similarity detection software is recommended before publication to confirm originality and identify any unintended overlap with previously published vestibular research literature.