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REVIEWER'S REPORT

Manuscript No.: IJAR-57911

Title: Successful Management of Antarmukhi Bhagandara (Low Anal Fistula Associated with Perianal Abscess) by Incision and Drainage Followed by Ksharasutra Therapy: A Case Report with Sequential Wound Healing Documentation

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 clinically relevant case of fistula in ano with perianal abscess management
- Sequential wound healing documentation provides visual evidence of treatment progress
- Clinical presentation, intervention, and follow up are described in a structured manner
- Integration of surgical drainage and Ksharasutra therapy is well explained
- Patient consent has been documented
- The report highlights preservation of anorectal function and absence of recurrence
- Relevant literature has been cited to support the discussion

Weakness of the study:

- The study is limited to a single case and lacks broader applicability
- Follow up duration is relatively short for assessing long term recurrence
- Several grammatical, typographical, and formatting errors are present throughout the manuscript
- Some sections contain repetition, particularly in the discussion and introduction
- Objective outcome measures are limited
- Ethical clearance details are not clearly mentioned
- Figures require more detailed captions and standardized presentation

Reviewers Comments:

This manuscript describes the successful management of a low anal fistula associated with a perianal abscess using incision and drainage followed by Ksharasutra therapy. The topic is clinically relevant, particularly in the context of integrating traditional Ayurvedic approaches with established surgical management. The sequential photographic documentation of wound healing is a notable strength and helps readers understand the progression of recovery. The case is presented in a logical manner, and the discussion is supported by relevant literature. Patient consent has been clearly documented, which is commendable. However, the manuscript requires substantial language editing, as grammatical errors, repetitive statements, inconsistent formatting, and sentence construction issues are evident throughout the text. Ethical clearance is not clearly stated and should be clarified. As a single case report, the findings cannot be generalized, and long term follow up data are limited. Overall, the manuscript provides useful clinical insight and educational value but would benefit from careful revision before publication.

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Previously Published anywhere/Plagiarism check:

There is no indication within the manuscript that this case report has been published previously. The work appears to be an original clinical observation supported by photographic documentation and relevant references. No obvious duplication was identified during review. However, a formal plagiarism screening should be conducted by the journal to confirm originality and ensure compliance with standard publication ethics and similarity requirements.