

REVIEWER'S REPORT

Manuscript No.: IJAR-58526

Title: Severe Bulbar-Predominant Dermatomyositis with Mi-2α Antibodies Presenting as Progressive Quadripareisis: A Case Report

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 case presents a rare and clinically significant manifestation of dermatomyositis
- Clinical history and diagnostic workup are described clearly
- MRI, laboratory findings, and antibody testing support the diagnosis
- Treatment approach and patient outcome are well documented
- Relevant literature strengthens the discussion
- Clinical images enhance understanding of the case
- The report provides useful learning points for early diagnosis and management

Weakness of the study:

- The report is based on a single patient
- Long term follow up information is limited
- Ethical approval and patient consent should be stated more clearly
- Muscle biopsy findings were not included
- Minor grammatical and formatting corrections are required
- Discussion could include more comparison with similar published cases
- Functional outcome assessment could be described in greater detail

Reviewers Comments:

This manuscript presents an interesting and uncommon case of bulbar-predominant dermatomyositis with Mi-2 antibodies presenting as progressive quadripareisis. The case is clinically important because the transient skin manifestations and severe dysphagia could delay diagnosis, making the report educational for practicing clinicians. The clinical presentation, investigations, imaging findings, treatment, and outcome are presented in a logical and easy-to-follow manner. The MRI images and laboratory findings support the diagnosis effectively. The manuscript is generally well written, although minor grammatical errors, spacing issues, and formatting inconsistencies should be corrected before publication. The authors should clearly mention ethical approval or state that it was not required for this case report and confirm that written informed consent for publication was obtained from the patient. The absence of muscle biopsy findings and limited follow up are notable limitations. Overall, this is a valuable case report that contributes useful clinical knowledge and is suitable for publication after minor revision.

Previously Published anywhere/Plagiarism check:

The manuscript appears to describe an original clinical case, and no obvious evidence of previous publication or duplicate submission was identified during this review. No clear indication of plagiarism was observed. Nevertheless, the journal should perform a routine plagiarism similarity check before publication to confirm originality and ensure adherence to publication ethics.