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REVIEWER'S REPORT

Manuscript No.: IJAR-58565

Title: Intrauterine Autologous Platelet-Rich Plasma for Thin Endometrium in Clomiphene Citrate–Induced Cycles: A Pre- and Post-Interventional Study

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 issue in infertility management
- Objectives and methodology are clearly defined and easy to follow
- Ethical approval and informed consent were appropriately documented
- Appropriate statistical methods were used for data analysis
- Results are presented clearly with supportive tables
- Discussion is well linked with existing published literature
- The findings have practical relevance for clinical reproductive medicine

Weakness of the study:

- The study included a relatively small sample size
- Absence of a control group limits the strength of conclusions
- Single center design reduces generalizability of the findings
- Follow up was limited to clinical pregnancy without live birth outcomes
- PRP preparation protocol requires greater standardization
- Minor grammatical and formatting corrections are needed
- Longer follow up would improve the clinical significance of the study

Reviewers Comments:

This manuscript evaluates the effect of intrauterine autologous platelet rich plasma on thin endometrium in women undergoing clomiphene citrate induced cycles. The topic is clinically relevant and addresses an important challenge in infertility treatment. The study design is appropriate for an initial evaluation, and the methodology is described in a clear and systematic manner. Ethical clearance and informed consent have been adequately mentioned, reflecting compliance with ethical standards. Statistical analysis is appropriate, and the findings are presented in a logical sequence with useful tables. The discussion compares the results with previous studies and explains the clinical significance reasonably well. However, the lack of a control group, small sample size, and single center setting limit the strength of the conclusions. Follow up until live birth would have strengthened the clinical impact. Minor grammatical and formatting revisions are recommended. Overall, the manuscript is well written, informative, and suitable for publication after minor revision.

Previously Published anywhere/Plagiarism check:

The manuscript appears to be original, and there is no obvious indication of duplicate publication in the submitted version. No visible signs of plagiarism are noted based on the available content. However, a formal plagiarism similarity assessment using standard journal software is recommended before publication to ensure originality and compliance with publication ethics.