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REVIEWER'S REPORT

Manuscript No.: IJAR-59028

Title: A STUDY TO COMPARE THE OUTCOMES OF TYMPANOPLASTY AND TYMPANOPLASTY WITH CORTICAL MASTOIDECTOMY IN MUCOSAL TYPE CHRONIC OTITIS MEDIA

Recommendation:
Accept as it is .....
Accept after minor revision.....
.....
Accept after major revision .....

Rating	Excel.	Good	Fair	Poor
Originality		Good		
Techn. Quality	Excellent			
Clarity		Good		
Significance	Excellent			

Reviewer's ID: Dr.Sumathi

Detailed Reviewer's Report

1. **Chronic otitis media is a long-standing infection or inflammation of the middle ear that causes persistent eardrum perforation and ongoing fluid or pus drainage lasting more than six weeks.**
2. **Chronic otitis media is a long-standing, persistent inflammation or infection of the middle ear. Unlike a typical, brief ear infection, this chronic condition usually spans several weeks or months and is frequently associated with a perforated eardrum (a hole in the tympanic membrane) or repetitive fluid buildup.**
3. **Tympanoplasty is a surgical procedure performed by an ear, nose, and throat (ENT) specialist to repair a hole or tear in the eardrum (tympanic membrane). The primary goals of this microsurgery are to restore natural hearing and waterproof the middle ear to prevent chronic infections.**
4. **A cortical mastoidectomy—also called a simple mastoidectomy—is a surgical procedure that opens and removes infected air cells from the mastoid bone behind the ear while keeping the back wall of the ear canal and middle ear structures intact.**

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5. **Graft uptake, often referred to as "graft take," is the process by which a transplanted tissue—most commonly a skin graft—successfully integrates, adheres, and establishes a new blood supply at the recipient wound bed. Because tissue grafts are harvested completely detached from their original blood supply, their survival relies entirely on a sequence of physiological phases that bridge them to the underlying tissue.**
6. **Postoperative discharge marks the official transition from a surgical center or hospital to home recovery once a patient meets specific stability criteria. A successful recovery depends entirely on strict adherence to instructions regarding wound management, pain control, dietary adjustments, and mobility limitations. Because anesthesia compromises coordination and decision-making, a responsible adult must drive you home and remain with you for at least the first 24 hours after surgery.**
7. **Tympanoplasty is a surgical procedure to repair a hole or perforation in the eardrum (tympanic membrane) and, if needed, reconstruct the tiny hearing bones (ossicles) in the middle ear. It is most commonly performed to correct chronic ear infections, persistent drainage, or hearing loss caused by trauma, repeated infections, or prior ear tubes.**
8. **Mucosal type chronic otitis media (COM), historically referred to as tubotympanic or "safe" COM, is a long-standing inflammatory condition of the middle ear. It is characterized by a permanent perforation of the pars tensa (the main portion of the eardrum) and subsequent chronic or recurrent infection of the middle ear mucosal lining. Unlike the squamosal (atticoantral) type, mucosal COM does not involve a cholesteatoma (an aggressive skin growth) and rarely leads to life-threatening intracranial complications.**
9. **Key words are good.**
10. **Result part can be made tables and graphs.**
11. **Summary points also be added.**
12. **References are not sufficient given very less. It should be added more references with discussion points.**
13. **After those changes good to publish in your journal.**