

REVIEWER'S REPORT

Manuscript No.: IJAR-59078

Title: Damage-Control Surgery in Severe Maxillofacial Trauma: A Pragmatic Scoping Review of Indications, Hemorrhage Control, Temporary Stabilization, and Transition to Definitive Reconstruction.

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 ID: JP085

Reviewer's Comment for Publication.

This article presents a scoping review of damage-control surgery in severe maxillofacial trauma. It reviews 35 primary clinical reports and focuses on patient selection, bleeding control, temporary stabilization, and the timing of final reconstruction. The review found that unstable patients and uncontrolled bleeding are the main reasons for using damage-control treatment. External fixation and embolization are useful in selected cases, but there is no standard rule for when to move from temporary treatment to definitive reconstruction.

Strength:

1. The topic is clinically important.
2. The review has a clear objective.
3. JBI and PRISMA-ScR guidance were used.
4. A large number of records were screened.
5. Different aspects of damage-control treatment are discussed.
6. The proposed four-phase clinical framework is useful.

Weakness:

1. Screening was not performed by two independent reviewers.
2. No formal risk-of-bias assessment was performed.
3. Most included studies were retrospective and had low-level evidence.
4. The studies used different definitions of severe trauma and damage-control surgery.
5. There is no standardized or validated criterion for deciding when definitive reconstruction should be performed.
6. The review cannot establish which treatment is superior because of the heterogeneity of the studies.

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Overall assessment:

The article provides a useful overview of damage-control surgery in severe maxillofacial trauma. However, the evidence is mainly based on retrospective studies and is highly heterogeneous. The conclusions should therefore be presented cautiously.

Recommendation: Manuscript accepted for publication after minor revision.