

REVIEWER'S REPORT

Manuscript No.: IJAR-59176

Title: Arterial Embolization in the Management of Genital Hemorrhage.

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 retrospective, descriptive, single-center study reports five patients with genital, obstetric, or postoperative hemorrhage treated with arterial embolization in 2026. The study describes different bleeding causes, target vessels, embolic agents, technical success, clinical success, and outcomes. Technical success was achieved in all five cases, while sustained clinical control after the first embolization was achieved in four patients (80%). No hysterectomy was required.

Strength:

1. The topic is clinically important and relevant.
2. The study describes different causes of genital and obstetric hemorrhage.
3. The clinical characteristics of all five cases are presented clearly.
4. Different embolic agents are described.
5. Target vessels and embolization techniques are explained.
6. Imaging and angiographic findings are supported by figures.

Weakness:

1. The sample size is very small, with only five patients.
2. The study is retrospective and single-center.
3. The patient group is heterogeneous, with different causes of bleeding.
4. There is no control or comparison group.
5. Statistical analysis is limited to descriptive data.
6. The results cannot be generalized to a larger population.

Overall assessment:

This is a clinically interesting case series showing the use of arterial embolization for different causes of genital hemorrhage. Major revision is recommended, mainly to improve the reporting of individual procedural details, follow-up, complications, reproductive outcomes, and the limitations related to the very small heterogeneous sample.

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Recommendation: Manuscript accepted for publication after major revision.