

REVIEWER'S REPORT

Manuscript No.: IJAR-59177

Title: Secondary Pelvic Hydatidosis in Multivisceral Cystic Echinococcosis.

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 case report describes a 38-year-old woman with multivisceral cystic echinococcosis involving the liver, lungs, spleen, and pelvis. Two pelvic cystic lesions were identified by ultrasound and MRI and were classified as Gharbi type III/WHO-IWGE CE2. The patient received albendazole and underwent combined hepatic, splenic, and pelvic surgery, with favourable reported outcome.

Strength:

1. The topic is rare and clinically relevant.
2. The case presentation is clearly described.
3. Ultrasound, CT, and MRI findings are presented.
4. The article explains the possible mechanism of secondary pelvic involvement.
5. Multivisceral disease and multidisciplinary management are discussed.
6. The role of albendazole is appropriately described.
7. Important surgical precautions, especially prevention of cyst rupture and spillage, are discussed.
8. The article clearly mentions its major limitations

Weakness:

1. It is only a single case, so the findings cannot be generalized.
2. The exact surgical procedure performed is not clearly described.
3. The exact dose and duration of preoperative albendazole are unavailable.
4. Patient-specific histopathological confirmation is not available.
5. The histopathology image is from the literature and not from the patient.

Overall assessment:

The article presents a rare and clinically interesting case of secondary pelvic hydatidosis with multivisceral involvement. Minor revision is recommended, particularly to improve the description of treatment, follow-up, patient-specific evidence, language, and presentation of clinical details.

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