

REVIEWER'S REPORT

Manuscript No.: IJAR-59188

Title: Selective Embolization and Surveillance of Multiple Bilateral Pulmonary Arteriovenous Malformations: A Case Report.

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 45-year-old woman with multiple bilateral pulmonary arteriovenous malformations (PAVMs). Three dominant left lower-lobe PAVMs were successfully treated using selective coil embolization, while smaller right-sided lesions were monitored because their feeding arteries were considered too small for intervention. The report also discusses the possibility of hereditary hemorrhagic telangiectasia (HHT), but a definite diagnosis was not established.

Strength:

1. The topic is clinically relevant.
2. The case involves multiple bilateral PAVMs.
3. Imaging findings are clearly described.
4. CT angiography and agitated-saline TTE were used appropriately to characterize the lesions and shunt.
5. The embolization procedure is described in good technical detail.
6. Successful angiographic and follow-up results are reported.

Weakness:

1. This is a single case report, so the findings cannot be generalized.
2. Long-term follow-up duration is not clearly reported.
3. The exact follow-up schedule and imaging intervals are not provided.
4. The sizes of all feeding arteries are not clearly reported.
5. The exact size and number of coils used are not mentioned.
6. Details of the patient's oxygen saturation before and after embolization are not provided.

Overall assessment:

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This is an interesting and clinically relevant case report showing selective embolization with surveillance of smaller bilateral PAVMs. Minor revision is recommended, mainly to provide clearer follow-up information, procedural details, clinical outcomes, and evaluation for possible HHT.

Recommendation: Manuscript accepted for publication after minor revision.