

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 Name: Dr S. K. Nath

Detailed Reviewer's Report

Strength of the study:

- Rare and clinically important vascular condition
- Clear clinical presentation
- Imaging findings are well documented
- CT angiography and echocardiography are appropriately used
- Embolization technique is clearly described
- Treated and untreated lesions are followed
- HHT suspicion is appropriately discussed
- Follow up imaging demonstrates treatment outcome
- Practical management approach is presented

Weakness of the study:

- Single case report limits generalisation
- Long term follow up is limited
- Oxygen saturation and detailed shunt measurements are not reported
- HHT diagnosis remains unconfirmed
- Genetic testing was not performed
- The reason for leaving smaller lesions untreated needs more detail
- Radiation exposure is not discussed
- Grammar and formatting require minor correction

Reviewers Comments:

The manuscript presents an interesting case of multiple bilateral pulmonary arteriovenous malformations managed with selective embolization and surveillance. The imaging findings, shunt assessment and technical details of coil embolization are clearly presented. The decision to treat the dominant lesions while observing smaller lesions provides a useful practical message. The authors also appropriately avoid making a definite diagnosis of hereditary hemorrhagic telangiectasia because the available Curaçao criteria are incomplete. Ethical clearance and written consent for publication are not clearly reported and should be added. More information on oxygen saturation, shunt severity and longer term follow up would strengthen the case. The rationale for not treating the smaller right sided lesions should also be explained more clearly. Grammar, spacing, sentence construction and figure formatting require minor editing. Overall, this is a useful and well illustrated case report with a clear clinical message, but some ethical and clinical documentation should be clarified before publication.

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Previously Published anywhere/Plagiarism check:

An exact title search did not identify the same publication. However, several closely related reports on multiple pulmonary arteriovenous malformations, embolization and long term surveillance have been published. A 2008 study described multiple PAVMs treated with coil embolization, and more recent reports have also addressed embolization techniques. The present case appears distinct, but a formal similarity check is recommended.