

REVIEWER'S REPORT

Manuscript No.:IJAR-59329

Title: SCHISTOSOMIASIS IN A NON-ENDEMIC REGION: A DIAGNOSTIC CHALLENGE. A CASE REPORT.

Recommendation:

Accept after major revision

Rating	Excel.	Good	Fair	Poor
Originality		Yes		
Techn. Quality		Yes		
Clarity			Yes	
Significance	Yes			

Reviewer's ID: JPR- 237

Detailed Reviewer's Report

The case is clinically interesting, but the diagnosis and causal relationship with schistosomiasis are not sufficiently established. Major revision is recommended.

- ***Diagnosis of schistosomiasis: Schistosomiasis is only suspected based on freshwater exposure. Provide confirmatory evidence: repeated stool/urine examination, serology, PCR/antigen testing, or histopathology. Clearly state whether Schistosoma ova were actually demonstrated.***
- ***Cryptosporidium diagnosis: Specify the diagnostic method used. Clarify whether organisms were confirmed by modified Ziehl–Neelsen staining, antigen detection, or PCR.***
- ***Avoid calling the finding definitive if it was only “suggestive.” Hepatic lesions. Describe the CT/US findings in detail: number, size, location, enhancement, calcification, periportal fibrosis, splenomegaly and portal hypertension.***
- ***Explain why the lesions were considered related to parasitic***

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infection. Child-Pugh B classification. Provide bilirubin, albumin, INR/PT, ascites and encephalopathy values. Mention the actual Child-Pugh score. Clarify whether the patient had hepatic insufficiency, chronic liver disease, or portal hypertension.

- *Epidemiological history: Provide geographical location and duration of freshwater exposure. Clarify whether the snail was eaten raw or cooked. Mention swimming, bathing, fishing or occupational freshwater exposure. Untreated water consumption alone is not the classical route of schistosomiasis transmission.*
- *Role of the snail: Provide evidence that *Pachychilus indiorum* is an intermediate host for the relevant *Schistosoma* species. Do not imply that snail exposure alone establishes transmission.*
- *Laboratory findings: Report CBC, eosinophil count, LFTs, bilirubin, albumin, INR and renal function. Explain whether eosinophilia was present or absent.*
- *Treatment: If schistosomiasis was diagnosed, discuss whether praziquantel was given and provide dose and treatment duration. If not treated, explain the rationale.*
- *Provide duration of follow-up. Compare pre- and post-treatment lesion size. Report changes in symptoms, ascites, liver function and parasitological findings.*