

REVIEWER'S REPORT

Manuscript No.: IJAR-59333

Title: From PCOS to PMOS: A Critical Review of Terminology, Multisystem Pathology, and Clinical Implications.

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:

- Important and timely topic
- Clear focus on PCOS terminology
- Multisystem aspects are well discussed
- Historical diagnostic criteria are reviewed
- Metabolic and reproductive factors are compared
- Different proposed terminologies are presented
- Literature search strategy is described
- Inclusion and exclusion criteria are provided
- Research gaps are identified
- Practical implications are discussed

Weakness of the study:

- Central terminology is now outdated
- PMOS is incorrectly expanded as Poly Metabolic Ovary Syndrome
- Current consensus uses Polyendocrine Metabolic Ovarian Syndrome
- Several conclusions are stronger than the evidence
- No formal risk of bias assessment is reported
- PRISMA reporting is incomplete
- Search and screening process needs better documentation
- Some numerical claims need source verification
- Proposed clinical recommendations are not validated
- Grammar and formatting require extensive editing

Reviewers Comments:

The manuscript discusses an important and highly relevant issue concerning the terminology and multisystem nature of PCOS. The historical review, phenotype comparison and discussion of metabolic, reproductive and psychological aspects are useful. Ethical clearance is not applicable because the work is based entirely on published literature, and this should be stated clearly. However, major revision is necessary. The most important concern is that the manuscript uses Poly Metabolic Ovary Syndrome as the proposed PMOS terminology. A major international consensus published in The Lancet in 2026 established Polyendocrine Metabolic Ovarian Syndrome as the new name for PCOS, so the manuscript must be completely updated and discussed in light of this development. The review also describes itself as both narrative and systematic, while formal risk of bias assessment is not reported. Several strong claims about diagnostic delay, patient anxiety and clinical benefits of renaming require stronger evidence. Grammar, sentence construction, spacing and references also need careful editing. Overall, the topic is valuable but substantial revision is required.

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Previously Published anywhere/Plagiarism check:

An exact search did not identify the same title. However, a major 2026 Lancet consensus paper has already been published on renaming PCOS as Polyendocrine Metabolic Ovarian Syndrome and directly overlaps with the central subject of this manuscript. The authors should clearly explain the originality of their review and update it accordingly. A formal similarity check is recommended.