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REVIEWER'S REPORT

Manuscript No.: IJAR-59366

Title: Chronic Cervical Lymphadenopathy: A Prospective Study in the Department of Otorhinolaryngology and Head and Neck Surgery of the National Hospital of Nouakchott (Mauritania)

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:

- Relevant ENT and head and neck topic
- Prospective single-center study design is appropriate
- Clear inclusion criteria are provided
- One-year study period is specified
- Thirty patients were evaluated in detail
- Clinical characteristics are presented systematically
- Multiple diagnostic investigations are discussed
- Histopathology is included as an important diagnostic tool
- Tuberculosis was identified as an important etiology
- Treatment outcomes are discussed

Weakness of the study:

- Major inconsistencies occur in the reported etiological percentages
- The conclusion reports tuberculosis at 50%, while the discussion reports 40%
- Malignancy is reported differently in different sections
- Some table percentages are incorrect
- Incidence cannot be calculated without the total ENT consultation denominator
- The statistical methodology is insufficiently described
- Ethical approval is not reported
- Several diagnostic results have incomplete denominators
- The results section is missing
- Grammar, formatting and reference presentation need substantial correction

Reviewers Comments:

The manuscript addresses an important clinical problem and provides useful information on chronic cervical lymphadenopathy from a Mauritanian ENT setting. The prospective design and one-year observation period are strengths. However, major revision is required because several important numerical and methodological inconsistencies affect the reliability of the findings. The discussion reports tuberculosis as 40% of cases, whereas the conclusion states 50%. Similarly, the reported proportions of benign, infectious, tumoral and malignant conditions are not consistently presented. Some table percentages are also incorrect, including the reported percentage for asthenia and the regional distribution. The stated objective of determining incidence cannot be fulfilled without reporting the total number of ENT consultations during the study period. The statistical methods require clearer description, including the comparative tests used. Ethical clearance and informed consent are not reported and should be clearly

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addressed. The manuscript also lacks a distinct Results section and requires extensive grammar, terminology, formatting and reference corrections. Overall, the topic is relevant, but substantial revision is necessary.

Previously Published anywhere/Plagiarism check:

An exact-title search did not identify an obvious publication with the same title. However, several prospective and retrospective studies on chronic cervical lymphadenopathy have already been published, including studies focusing on clinical profile, etiology and diagnostic evaluation. A formal similarity check is recommended to establish originality before publication.