

## REVIEWER'S REPORT

Manuscript No.: IJAR-50621

Date: 14-03-2025

**Title:** AN UNUSUAL FOREIGN BODY IN OESOPHAGUS.

### Recommendation:

Accept as it is.....**YES**.....  
 Accept after minor revision.....  
 Accept after major revision .....  
 Do not accept (*Reasons below*) .....

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

**Reviewer's Name:** Dr Aamina

**Reviewer's Decision about Paper:** **Recommended for Publication.**

**Comments** (*Use additional pages, if required*)

### Reviewer's Comment / Report

This case report presents a detailed and structured account of an unusual foreign body—a plastic bottle cap—impacted in the oesophagus, requiring surgical intervention. The article is well-organized, with a clear introduction, case description, and management approach.

The abstract concisely summarizes the case, highlighting the challenges faced during retrieval and the necessity for an open transcervical approach. The inclusion of relevant keywords ensures that the study is easily searchable in medical literature.

The introduction effectively provides context by discussing the frequency and risks associated with oesophageal foreign bodies. It references common foreign objects encountered in clinical practice and highlights the potential complications such as oesophageal perforation, mediastinitis, and airway obstruction. The discussion of esophagoscopy as the gold standard

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for removal, along with its limitations, sets the stage for the case presentation. The inclusion of literature citations strengthens the credibility of the claims made regarding treatment approaches.

The case report is well-documented, offering a step-by-step account of the patient's clinical journey. The description of the failed endoscopic attempts, the detailed radiological findings, and the rationale for choosing an open surgical approach add depth to the narrative. The surgical technique is described with precision, ensuring clarity for readers, especially those in the medical field. The mention of key anatomical landmarks and the careful preservation of the recurrent laryngeal nerve demonstrate the meticulousness of the procedure.

The incorporation of CT scan findings enhances the report's comprehensibility, providing visual confirmation of the foreign body's location and its impact on surrounding structures. The stepwise surgical intervention, from incision to retrieval, is presented in a manner that facilitates understanding. The use of images further complements the written content, making it easier to grasp the complexity of the case.

Overall, this case report is well-written, informative, and relevant to otolaryngology and surgical practice. It provides valuable insight into the challenges of managing impacted oesophageal foreign bodies and underscores the importance of considering surgical intervention when endoscopic retrieval fails.