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#### REVIEWER'S REPORT

Manuscript No.: IJAR-50716 Date: 19.03.25

Title: Comparative Outcomes of Total Obstetric Hysterectomy Vs Supra-cervical Obstetric Hysterectomy in cases of Placenta Previa along with Placenta Accreta Spectrum

Recommendation:	Rating	Excel.	Good	Fair	Poor
Accept as it is	Originality		$\sqrt{}$		
	Techn. Quality				
	Clarity			$\sqrt{}$	
	Significance		$\sqrt{}$		

Reviewer Name: Dr. Jyotika Singh Date: 19.03.25

### Reviewer's Comment for Publication.

(*To be published with the manuscript in the journal*)

The reviewer is requested to provide a brief comment (3-4 lines) highlighting the significance, strengths, or key insights of the manuscript. This comment will be Displayed in the journal publication alongside with the reviewers name.

This manuscript addresses a clinically significant comparison between Total Obstetric Hysterectomy and Supracervical Obstetric Hysterectomy in managing Placenta Previa with Placenta Accreta Spectrum. The study offers valuable insights into surgical outcomes, contributing to evidence-based decision-making. Its strength lies in focused objective and institution-based data, which can guide clinical practice in similar settings.

**Reason for minor changes:** The title and objective are clear, concise, and relevant to the clinical context. They effectively convey the comparative nature of the study and specify the patient population and institutions involved. However, minor grammatical and structural improvements (as suggested above) can enhance clarity and professionalism in presentation.

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# Detailed Reviewer's Report

### Introduction

The manuscript addresses an important and clinically relevant topic—comparing outcomes of Total Obstetric Hysterectomy (TOH) versus Supracervical Obstetric Hysterectomy (SCOH) in patients diagnosed with Placenta Previa and Placenta Accreta Spectrum (PAS). The introduction broadly establishes the clinical significance of the subject and the rationale for comparing the two surgical approaches. However, the background could be strengthened by including more recent literature and a concise explanation of the controversy or clinical dilemma surrounding the choice between TOH and SCOH. A clearer articulation of the research gap and objectives would improve the impact.

## **Objectives**

The study aims to:

- Compare clinical outcomes of Total Obstetric Hysterectomy (TOH) and Supracervical Obstetric Hysterectomy (SCOH) in patients diagnosed with Placenta Previa with PAS.
- Evaluate intraoperative parameters such as estimated blood loss, need for blood transfusion, duration of surgery.
- Assess postoperative outcomes including hospital stay, complications, and overall maternal morbidity.
- Determine whether SCOH offers any surgical advantage over TOH in select PAS cases.

# Methodology

The study design appears to be a retrospective comparative analysis conducted at a tertiary hospital. The inclusion and exclusion criteria are mentioned but require further clarity. The sample size is modest (22 cases), and the grouping into TOH and SCOH is appropriate.

However, the manuscript would benefit from the following:

- A more detailed explanation of how the diagnosis of PAS was confirmed (prenatal imaging vs. intraoperative findings).
- Specification of the statistical tests used for comparison.
- Ethical approval and consent process (even for retrospective studies) should be explicitly stated.

### **Results**

The results section presents comparative findings related to blood loss, transfusion requirements, operation duration, hospital stay, and postoperative complications. The data are relevant, but the presentation lacks clarity.

Key issues include:

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- Tables are informative but should be properly numbered and referenced in the text.
- Some statistical values are mentioned, but the significance levels (p-values) should be clearly stated and interpreted.
- A brief narrative highlighting the key trends would help readers understand the implications of the results more easily.

### Limitations

The study acknowledges some limitations implicitly but does not explicitly discuss them. Suggested limitations that should be addressed include:

- Small sample size limits the generalizability of the findings.
- Retrospective design may be subject to selection bias and incomplete records.
- Absence of long-term follow-up data on maternal morbidity or subsequent fertility.

## **Strengths**

- The study focuses on a critical decision in obstetric care where evidence is still evolving.
- Real-world data from a high-burden tertiary care hospital add practical value.
- Comparative analysis provides insight into potential benefits of conserving the cervix in SCOH procedures.

### Recommendations

- Clarify the research objectives and hypotheses in the introduction.
- Include more detailed methodology, especially on diagnostic criteria and statistical analysis.
- Improve clarity in the results section with better-structured tables and clear interpretation.
- Discuss the findings in the context of existing literature in the discussion section.
- Explicitly mention limitations and suggest directions for future research.

## **Final Thought**

The manuscript presents clinically relevant and interesting data on a high-risk obstetric population. With improvements in structure, clarity, and discussion of results and limitations, the paper could make a meaningful contribution to literature on surgical management of PAS. Therefore, I recommend "Accept after minor revision."

Thank You