

REVIEWER'S REPORT

Manuscript No.: IJAR-50808

Date: 29-03-2025

Title: LATERAL RECTUS PALSY AFTER POSTERIOR SUPERIOR ALVEOLAR NERVE BLOCK

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*)

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Reviewer's Comment / Report

Abstract

The abstract provides a concise and clear overview of the case, highlighting the rarity of ocular complications associated with local anesthesia, particularly involving the posterior superior alveolar nerve. The mention of potential ophthalmologic complications creates an appropriate context for the reported case. The abstract successfully introduces the focus of the article, which is the occurrence of temporary lateral rectus muscle paralysis following a dental nerve block.

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Introduction

The introduction effectively sets the stage by providing historical and clinical context. The reference to the first reported ophthalmologic complication in 1936 establishes the long-standing but rare association between dental anesthesia and ocular complications. The listing of various documented complications, including diplopia, ptosis, and even permanent blindness, emphasizes the seriousness of the issue. The introduction transitions smoothly into the purpose of the report by introducing the presented case of transient diplopia and lateral rectus palsy.

Case Report

The case report is clearly presented, detailing the patient's complaint, clinical findings, anesthesia administration, and subsequent development of ocular symptoms. The description of the anesthetic technique, including the type and concentration of anesthetic used, is appropriate and adds technical clarity. The progression of symptoms is well-described, including the absence of ptosis and other ocular signs, which helps isolate the complication to lateral rectus palsy. The documentation of the patient's response, management steps, and recovery timeline is complete and informative. The report also highlights the patient's psychological response, including anxiety and panic, which adds a human dimension to the clinical narrative.

Clinical Significance

The case demonstrates the importance of recognizing rare but significant complications associated with posterior superior alveolar nerve block. The temporary nature of the palsy and its resolution within an hour, while reassuring, underscores the necessity of appropriate patient management and referral to ophthalmology. The mention of the patient's continued anxiety and palpitations, leading to an emergency visit, further illustrates the need for awareness of both physical and psychological impacts in such cases.

Overall Assessment

The article is well-organized and provides a thorough account of a rare clinical occurrence. The flow from background information to the case description and outcome is logical and easy to follow. The combination of clinical details, patient-centered observations, and relevant literature makes the report informative for dental and medical practitioners alike. The case contributes

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valuable insight into the spectrum of possible complications following dental local anesthesia and the importance of prompt recognition and supportive management.