

REVIEWER'S REPORT

Manuscript No.: IJAR- 51334

Date: 30/04/2025

Title: : Management of Severe Hypertriglyceridemia During Pregnancy: Case Report and Therapeutic Strategies

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

Date: 30/04/2025

Reviewer's Comment for Publication:

This paper highlights the critical importance of early recognition and a tailored, multidisciplinary management strategy for pregnant women with severe hypertriglyceridemia. Combining dietary adjustments, omega-3 fatty acids, and plasmapheresis can effectively reduce triglyceride levels rapidly, preventing severe complications like pancreatitis and adverse obstetric outcomes. Continuous monitoring and early intervention are essential for optimizing both maternal and fetal prognosis. While the case demonstrates promising results, further research with larger cohorts and long-term follow-up is necessary to establish standardized treatment protocols.

Reviewer's Comment / Report

Strengths:

- Comprehensive Case Presentation:** The paper details a real case involving a pregnant woman with familial hypertriglyceridemia complicated by acute pancreatitis, providing valuable clinical insights.
- Multidisciplinary Approach:** Emphasizes the importance of combining dietary modifications, omega-3 supplementation, and plasmapheresis, showcasing a holistic treatment paradigm.
- Literature Integration:** The authors review existing literature on managing hypertriglyceridemia in pregnancy, adding depth and context to their case report.
- Practical Management Strategies:** Offers clear guidance on rapid triglyceride reduction techniques and monitoring protocols, which can inform clinical practice.

Weaknesses:

- Limited Sample Size:** As primarily a case report, the findings may not be generalizable to all pregnant women with hypertriglyceridemia.
- Lack of Long-term Follow-Up:** The paper does not provide long-term maternal or fetal outcomes post-treatment, limiting understanding of sustained efficacy and safety.
- Insufficient Detail on Pharmacological Use:** While discarding or cautiously using medications like fibrates and statins is mentioned, there's limited discussion on specific protocols, dosages, or potential side effects.
- Potential Bias:** The success of the interventions presented may reflect specific circumstances; caution should be exercised when applying to different clinical scenarios.