

REVIEWER'S REPORT

Manuscript No.: IJAR-51648

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Title: EFECTIVIDAD DEL BLOQUEO PENG PARA ANALGESIA PERIOPERATORIA EN CIRUGIA DE CADERA EN EL HOSPITAL REGIONAL 1 DE OCTUBRE, ISSSTE

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

General Overview:

This thesis presents a focused and clinically relevant investigation into the effectiveness of the PENG (Pericapsular Nerve Group) block as a perioperative analgesic strategy in patients undergoing hip surgery. The study is clearly articulated, structured, and rooted in a well-defined clinical context. The research offers practical insight into pain management protocols and contributes valuable data to regional anesthesia literature in the orthopedic surgical setting.

Abstract and Objectives:

The abstract succinctly conveys the rationale, methodology, key findings, and conclusion of the study. The context of aging demographics in Mexico and the rising incidence of hip fractures is clearly presented as a pressing clinical concern. The objective—to evaluate perioperative analgesia using the PENG block—is sharply defined and sets the tone for the subsequent analysis.

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Methodology:

The study employs a prospective, analytical longitudinal cohort design, which is well-suited for the investigation of analgesic outcomes over time. The selection of 40 patients and the use of the Numerical Analogue Scale (ENAS) for pain measurement are appropriate for the scope of the study. The description of the ultrasound-guided technique and the pharmacologic agent (0.3% ropivacaine) is clearly presented, supporting reproducibility.

Results:

The data is presented with clarity and demonstrates a statistically significant reduction in pain at 30 minutes and 10 hours post-block, with a p-value of 0.00. The 24-hour data, while showing a continued analgesic effect, presents a p-value of 0.116, indicating a reduction in statistical significance at this later stage. The categorization of pain into mild, moderate, and severe provides clinical relevance to the numerical data. The findings strongly support the PENG block's short-term analgesic effectiveness in the perioperative setting.

Conclusion:

The conclusion effectively synthesizes the findings and reaffirms the safety and feasibility of the PENG block in the studied population. It emphasizes opioid-sparing benefits and improved patient mobilization as important outcomes. The statement aligns with contemporary priorities in perioperative care, particularly in minimizing systemic opioid use and enhancing recovery protocols.

Structure and Presentation:

The document appears well-organized, with clear sectioning (e.g., Introduction, Methodology, Results, Conclusion). The clinical background is succinctly described in the chapter headings, and the narrative maintains coherence and logical flow. Terminology is consistent and medically precise, and statistical interpretation is adequately addressed.

Scholarly Contribution:

This thesis makes a notable contribution to anesthesiology and orthopedic surgery, particularly in the context of regional anesthesia applications in Latin American clinical settings. The research supports broader trends in adopting multimodal analgesia and enriches the evidence base supporting the PENG block in hip surgery.

Final Remarks:

Overall, the thesis demonstrates strong clinical relevance, methodological soundness, and a clear articulation of results. It offers valuable insights for anesthesiologists and surgeons seeking effective, opioid-sparing analgesic strategies for managing hip fracture patients in perioperative care.

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