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REVIEWER'S REPORT

Manuscript No.: IJAR-52354 Date: 18/06/2025

Title: Post traumatic pseudoaneurysm of right subclavian artery: a case report

Recommendation:	Rating _	Excel.	Good	Fair	Poor
✓ Accept as it is	Originality		√		
Accept after minor revision	Techn. Quality		√		
Accept after major revision	Clarity		√		
Do not accept (Reasons below)	Significance		√		

Reviewer Name: Dr. S. K. Nath

Date: 18/06/2025

Reviewer's Comment for Publication:

The authors conclude that subclavian artery pseudoaneurysms, though rare, require a high index of suspicion in high-energy chest trauma, especially with cervical spine injuries. They advocate for early diagnosis using CTA and favor endovascular management due to its minimally invasive nature and improved outcomes. The case underscores the urgency of prompt diagnosis and intervention to prevent catastrophic complications such as rupture.

Reviewer's Comment / Report

Strengths

- 1. **Rare Case Documentation:** The report adds valuable insights into an uncommon traumatic injury—subclavian artery pseudoaneurysm—highlighting its association with high-energy trauma and cervical spine injuries.
- 2. **Imaging and Diagnostic Approach:** It illustrates the utility of CTA in early detection and monitoring of pseudoaneurysm progression, supporting current best practices.
- 3. Clinical Insight and Rationale: The discussion contextualizes the injury within the framework of trauma management and emphasizes the importance of prompt diagnosis and the advantages of endovascular treatment.
- 4. **Integration of Multisystem Injuries:** The report presents a comprehensive overview of the patient's concomitant injuries (cranio-cerebral hemorrhage, thoracic injuries, spinal dislocation), highlighting the complexity of trauma cases.

Weaknesses

- 1. **Limited Management Details:** The report lacks detailed information regarding attempts at endovascular intervention or surgical attempts, including specifics about the timing, techniques, or contraindications faced
- 2. **Short Follow-Up and Outcome:** The patient's deterioration is described briefly; however, there is little discussion about ongoing management strategies, supportive measures, or alternative options considered.
- 3. Lack of Comparative Literature Analysis: Although it references existing literature, the discussion could be expanded to compare different management approaches (surgical vs. endovascular) or include more recent evidence.
- 4. Case Specific Limitations: The case emphasizes the fatal outcome but provides limited insight into whether earlier intervention could have altered the prognosis, considering the severity of concurrent injuries.