

REVIEWER'S REPORT

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Date: 19/06/2025

Title: CASE REPORT OF TUBEROUS SCLEROSIS IN PATIENT PRESENTED WITH VASAMOL CONSUMPTION

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: 20/06/2025

Reviewer's Comment for Publication:

This case report effectively illustrates an atypical presentation of tuberous sclerosis, emphasizing the significance of cutaneous and radiological signs even in the absence of neurological symptoms. It highlights the potential for external substances like vasamol to precipitate or complicate multi-organ involvement. Despite some limitations, including the absence of genetic confirmation and long-term follow-up, the report contributes valuable clinical insights into recognizing and managing TSC in diverse scenarios. Overall, the paper underscores the importance of a high index of suspicion based on skin and imaging findings for diagnosing TSC, especially when neurological features are absent, and illustrates the need for careful evaluation of external factors influencing disease course.

Reviewer's Comment / Report

Strengths:

- Comprehensive Clinical Detailing:** The report thoroughly documents the patient's dermatological, neurological, radiological (MRI, ultrasonography), and laboratory findings, providing a clear picture of TSC manifestations.
- Highlighting Atypical Presentation:** The case emphasizes that neurological symptoms such as seizures or cognitive impairment are not always present, underpinning the importance of skin and radiological clues for diagnosis.
- Linking External Factors with Disease Manifestation:** The association of vasamol consumption with exacerbation of organ involvement (rhabdomyolysis, hepatitis, AKI) offers valuable insight into how external substances can influence disease course.
- Inclusion of Diagnostic Imaging and Skin Lesions:** The detailed descriptions of cortical tubers, angiomyolipomas, and skin lesions like adenoma sebaceum are instrumental for clinicians in recognizing TSC.
- Integration of Genetic and Pathophysiological Insights:** The discussion references the genetic basis involving TSC1/TSC2 and mTOR pathway dysregulation, enhancing understanding of disease mechanisms.

Weaknesses:

- Limited Genetic Analysis:** The absence of genetic testing due to financial constraints limits the definitive confirmation of TSC mutations, which is a drawback for conclusive diagnosis in such cases.
- Lack of Long-term Follow-up Data:** The report does not provide information about the patient's long-term management or outcomes, which is vital for understanding disease progression and response to therapy.

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3. **Possible Underreporting of Neurological Evaluation:** While MRI findings are discussed, neuropsychological assessments or detailed seizure history are not elaborated, limiting the scope of neurological evaluation.
4. **Potential Bias in Causality Conclusion:** The link between vasamol consumption and organ crisis is suggestive but not definitively proven; other factors may contribute. A more detailed exploration or controlled analysis would strengthen this association.
5. **Limited Discussion on Management Strategies:** The paper mentions initial management of hepatitis and renal issues but does not extensively discuss specific therapies for TSC, such as mTOR inhibitors, or multidisciplinary approaches.