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REVIEWER'S REPORT

Manuscript No.: IJAR-52794 Date: 16-07-2025

Title: MYCOPHENOLATE MOFETIL INDUCED GINGIVAL ENLARGEMENT IN A PATIENT WITH LUPUS ENTERITIS AND NEPHRITIS: A RARE CASE REPORT

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

Reviewer Name: Dr Aamina

Reviewer's Comment for Publication.

General Assessment:

The manuscript presents a rare and clinically valuable case of gingival enlargement associated with Mycophenolate Mofetil (MMF) therapy. It effectively illustrates an uncommon side effect of a widely used immunosuppressant in the context of a complex systemic condition. The case is clearly documented and contributes meaningfully to the dental and medical literature by emphasizing the importance of interdisciplinary care in managing immunosuppressive therapy complications.

Abstract Evaluation:

The abstract concisely outlines the essential elements of the case, including the patient's background, clinical findings, intervention strategies, and follow-up outcome. It clearly communicates the rarity and significance of the condition and appropriately emphasizes the importance of monitoring oral health in patients receiving MMF. The summary is coherent and scientifically relevant for practitioners in both dentistry and medicine.

Introduction Evaluation:

The introduction effectively contextualizes the condition by outlining drug-induced gingival enlargement and its most common pharmacological triggers. The background discussion is accurate and supported by references to established medications such as cyclosporine, phenytoin, and calcium channel blockers. The pathophysiological basis—altered gingival fibroblast activity and extracellular matrix overproduction—is appropriately introduced. The mention of genetic and hygiene-related contributing factors adds further depth and relevance to the discussion.

Case Relevance and Clinical Contribution:

The manuscript successfully highlights a rare adverse reaction to MMF, which is more commonly associated with gastrointestinal and hematological side effects. The documentation of a case involving

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lupus enteritis and nephritis strengthens its relevance, as these conditions require long-term immunosuppressive therapy. The case underscores the need for dental surveillance in such patients and the benefits of timely surgical and pharmacological intervention.

Clinical Management:

The treatment protocol—beginning with nonsurgical management followed by gingivectomy and gingivoplasty—is appropriate and well-aligned with standard periodontal care for drug-induced gingival enlargement. The eventual discontinuation of MMF, followed by successful recovery and absence of recurrence at one year, indicates effective multidisciplinary management. This clinical trajectory is useful for practitioners managing similar patients.

Language and Clarity:

The manuscript is clearly written in professional and accessible language. Technical terms are used appropriately and are well-integrated into the narrative. The tone remains objective and clinical throughout, suitable for a case report format.

Educational and Practical Value:

This case provides educational value for dental surgeons, periodontists, nephrologists, and rheumatologists alike. It reinforces the importance of including oral health evaluations in the treatment plans for patients undergoing long-term immunosuppressive therapy and demonstrates the practical outcomes of interdisciplinary communication and collaboration.

Final Remarks:

The case report offers a concise and informative depiction of a rare clinical presentation. It bridges dentistry and systemic medicine and is of significant interest to clinicians managing immunosuppressed patients. The case emphasizes not only diagnostic and therapeutic strategies but also the preventive and collaborative aspects of comprehensive care.