

REVIEWER'S REPORT

Manuscript No.: IJAR-52833

Date: 15/07/2025

Title: Wilkie's Syndrome: Case Report and Surgical Approach in a Patient with High Intestinal Obstruction

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: 16/07/2025

Reviewer's Comment for Publication:

The authors conclude that SMAS is a rare but significant cause of upper gastrointestinal obstruction that requires a high index of suspicion, especially in patients with rapid weight loss. They endorse early diagnosis with imaging modalities like CT and underscore laparoscopic duodenojejunostomy as a preferred definitive treatment offering quick recovery and favorable outcomes. The case underscores the importance of timely surgical intervention when conservative management fails.

Reviewer's Comment / Report

Strengths of the Paper

- **Clear Clinical Presentation:** It provides a detailed account of the patient's history, symptoms, physical findings, and diagnostic process, which can aid clinicians in recognizing similar cases.
- **Use of Diagnostic Imaging:** The report highlights the role of contrast-enhanced CT in confirming SMAS, including specific measurements (angle and distance), reinforcing evidence-based diagnosis.
- **Surgical Details:** The paper offers a thorough description of the laparoscopic duodenojejunostomy procedure, including technique and intraoperative findings, which is valuable for surgical practitioners.
- **Successful Outcome:** The report demonstrates a positive prognosis with minimally invasive surgery, supporting laparoscopic approach as effective and safe.
- **Concise Literature Context:** The discussion contextualizes SMAS within the broader literature, emphasizing its rarity, pathophysiology, and treatment options.

Weaknesses of the Paper

- **Limited Generalizability:** As a single case report, findings cannot be broadly generalized; larger series are necessary for definitive conclusions.
- **Absence of Long-term Follow-up:** The report mentions an uneventful immediate postoperative course but does not discuss long-term outcomes or potential complications.
- **Lack of Comparative Analysis:** The paper would benefit from including a review of alternative surgical techniques or conservative management outcomes.
- **Limited discussion on differential diagnosis:** Although imaging findings are detailed, the work-up of differential diagnoses (other causes of upper GI obstruction) is not elaborated.
- **Potential Bias:** As a case report, it inherently reflects a selective experience that may not represent all SMAS cases.