

## REVIEWER'S REPORT

Manuscript No.: IJAR-52943

Date: 21/07/2025

**Title: Thyroid-Axis Alterations in Acute Organophosphorus Poisoning and Their Association with Clinical Outcomes in the Intensive-Care Setting**

### 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: Sakshi Jaju

Date: 21/07/2025

### Reviewer's Comment for Publication.

#### Abstract:

The abstract briefly mentions the aim of the study — to analyze how thyroid hormone levels are affected in patients with organophosphorus (OP) poisoning, and how these changes relate to patient outcomes like ICU stay, ventilation, and mortality. It can be improved by using simpler language and clearly stating the main findings and conclusion.

#### Introduction:

The introduction explains the toxicity of OP compounds, their effect on cholinergic receptors, and how they might influence thyroid hormones (TSH, T3, T4). It also provides a clear rationale for studying thyroid dysfunction in OP poisoning cases, supported by scientific literature.

#### Material and Methods:

The study design is prospective and observational, conducted over a defined period with a calculated sample size of 55 patients. Inclusion and exclusion criteria are clearly stated. Statistical tools like t-tests and chi-square were appropriately used.

#### Result and Discussion:

Out of 55 patients, 13 (23.64%) showed subclinical hyperthyroidism. Majority of affected patients were males aged 20–50. Thyroid dysfunction was not significantly linked with intubation, ICU stay, or mortality.

The discussion is comprehensive but can be shortened and made more reader-friendly.

#### Relevance and Contribution:

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This is a valuable study because it explores an under-researched aspect of OP poisoning. It provides clinicians with useful insights about when and how to consider thyroid testing in these patients.

### **Clarity and Writing:**

Tables and figures can be better aligned and labeled. Spelling errors and inconsistent formatting in references should be corrected. Sentences can be shortened for better readability.

### **Recommendation:**

Manuscript accepted for the publication after minor corrections