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REVIEWER'S REPORT

Manuscript No.: IJAR-52952 Date: 23/07/2025

Title: "Optimizing Preoperative Anemia Management in Moroccan Surgical Patients: A Simplified Multimodal Intervention"

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: 23/07/2025

Reviewer's Comment for Publication:

The study demonstrates that a simple, multimodal preoperative anemia management strategy—combining nutritional guidance and oral iron supplementation—can significantly improve hemoglobin levels and reduce transfusion requirements in Moroccan surgical patients. This approach offers a practical, cost-effective solution compatible with resource-limited settings. However, further research with larger, randomized samples and longer follow-up is necessary to confirm these findings and assess broader outcomes.

Reviewer's Comment / Report

Strengths:

- Contextually Relevant and Feasible Approach: The study focuses on a pragmatic, resource-conscious intervention suited for the Moroccan healthcare setting, which may have limited access to advanced therapies like intravenous iron or erythropoietin.
- Clear Objective and Outcomes: The primary outcome (change in hemoglobin levels) and secondary outcomes (transfusion rates, feasibility, adherence) are well-defined, allowing for straightforward assessment of the intervention's efficacy.
- Methodological Design: A prospective controlled trial design enhances the reliability of findings. Ethical approval and informed consent processes were properly addressed.
- Detailed Intervention Description: The intervention combines nutritional advice in culturally appropriate formats with standard oral iron therapy, which is simple and explainable, improving adherence prospects.
- Demonstrated Effectiveness: Results showed a statistically significant increase in preoperative hemoglobin (+1.1 g/dL in the intervention group vs. +0.2 g/dL in controls; p < 0.001), and a reduction in transfusion rates, indicating clinical relevance.

Weaknesses:

- Limited Sample Size: Approximately 120 patients limit the statistical power and generalizability of the findings, especially across diverse populations or different surgical procedures.
- Potential Bias Due to Non-Randomization: In some settings, randomization was not feasible, and patients were enrolled consecutively, which could introduce selection bias or confounding factors despite baseline comparability.

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- Short Follow-Up and Postoperative Data: The study mainly assesses preoperative hemoglobin and immediate postoperative transfusion needs, but long-term outcomes, such as recovery quality or functional status, are not addressed.
- Limited Details on Adherence and Dietary Impact: While adherence was self-reported, the study does not explore in-depth how dietary changes influenced absorption or whether cultural factors impacted compliance.
- External Validity and Implementation Challenges: While applicable in Morocco, applicability to other regions with different healthcare resources or cultural contexts may be limited, and large-scale implementation strategies are not discussed.