



# International Journal of Advanced Research

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#### REVIEWER'S REPORT

**Manuscript No.:** IJAR-53058 Date: 29/07/2025

Title: Mortality Pattern and Causative Factors in the Critically Ill Patients in a Tertiary Care Centre

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

Reviewer Name: Dr. S. K. Nath

Date: 30/07/2025

#### **Reviewer's Comment for Publication:**

The study underscores the dominance of cardiovascular diseases as a primary cause of mortality in ICU patients, with significant contributions from pulmonary, renal, and neurological conditions. The findings highlight the interconnectedness of organ systems via the kidney-heart-lung axis and suggest that systemic pathology plays a crucial role in critical care outcomes. The authors advocate for a holistic approach to managing NCDs, emphasizing early detection and integrated treatment strategies.

# Reviewer's Comment / Report

### **Strengths**

- 1. **Focus on a Critical Public Health Issue:** The study addresses the increasing burden of non-communicable diseases in a tertiary healthcare setting in India, which is highly relevant given the global rise in NCDs.
- 2. **Large Data Set:** Inclusion of 149 mortality cases over two years provides a substantial data pool to analyze patterns and causative factors.
- 3. **Holistic View of Multiorgan Impact:** The emphasis on the kidney-heart-lung axis offers insight into the interconnected pathophysiology of systemic diseases, which can inform comprehensive treatment approaches.
- 4. **Context-Specific Data:** As a study conducted in India, it provides valuable data pertinent to resource-limited settings, which often lack detailed epidemiological studies.

## Weaknesses

- 1. **Retrospective Design Limitations:** The retrospective nature limits causal inference and may be subject to data recording biases or missing variables.
- 2. **Lack of Detailed Patient Demographics:** The study mentions age and gender distribution but lacks depth about comorbidities, socioeconomic status, or prior health history, which could influence outcomes.
- 3. **Limited Clinical Variables:** While the primary diagnoses are recorded, there is limited information about treatment modalities, severity scores, or intervention specifics that could impact mortality.
- 4. **Absence of Statistical Analysis:** The report mainly provides descriptive statistics. Incorporating inferential statistics or multivariate analysis could strengthen the findings and identify risk factors more precisely.
- 5. **Potential Selection Bias:** As the data is from a single center, findings may not be generalizable to other populations or healthcare settings.