

## REVIEWER'S REPORT

Manuscript No.: IJAR-53292

Date: 14-08-2025

**Title: Anesthetic management of high grade butterfly glioma of the corpus callosum- A case report**

### Recommendation:

**Accept as it is .....YES.....**

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 Aamina

### Reviewer's Comment for Publication.

### General Overview

This case report addresses an uncommon and clinically challenging entity—high-grade butterfly glioblastoma involving the corpus callosum—and focuses on anesthetic considerations during surgical management. The topic is of high relevance to neurosurgical anesthesia practice due to the tumor's aggressive nature, eloquent location, and associated perioperative complexities. The paper successfully highlights the dual aspects of tumor pathology and anesthetic challenges, emphasizing multidisciplinary coordination.

### Abstract Evaluation

The abstract succinctly outlines the clinical context, the nature of the tumor, its imaging characteristics, and the anesthetic implications. The emphasis on maximal safe resection alongside adjuvant therapy provides an evidence-based backdrop. The reference to the "butterfly" MRI pattern helps in visual conceptualization. The abstract clearly conveys the unique anesthetic considerations, including maintenance of optimal physiological parameters, early postoperative neurological assessment, and inter-team communication, making the clinical focus explicit.

### Introduction Evaluation

The introduction places the condition in epidemiological and prognostic context, citing the reported incidence range (2.2%–14.3%) and linking it to poor outcomes. The discussion of the current uncertainty regarding whether prognosis is driven by tumor biology or treatment approach adds a thought-provoking dimension. The acknowledgment of gaps in evidence for treatment strategies, and the possibility that aggressive therapy may still offer benefit, positions the report as both clinically relevant and exploratory. The section also clearly sets the stage for why anesthetic planning requires special consideration in bGBM, given the bi-hemispheric spread and involvement of eloquent cortical areas.

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### **Case Focus and Relevance**

Although the detailed intraoperative management is not yet presented in the provided text, the framing in both abstract and introduction makes it evident that this report will focus on tailored anesthetic techniques for a tumor with critical anatomic involvement. The emphasis on preoperative neurological assessment, intraoperative neurophysiological monitoring (IONM), and vigilant postoperative follow-up aligns well with best practices in neuroanesthesia for complex cases.

### **Overall Assessment**

The manuscript sets a strong foundation for a clinically instructive case report. The rarity of the tumor location, the challenges of balancing maximal resection with functional preservation, and the specific anesthetic considerations make it a potentially valuable reference for anesthesiologists and neurosurgeons alike. The abstract and introduction are coherent, clinically relevant, and well-aligned with the stated objective of sharing anesthetic strategies for this high-risk neurosurgical scenario.