

REVIEWER'S REPORT

Manuscript No.: IJAR-53418

Date: 20-08-2025

Title: Levonorgestrel Intrauterine System (MIRENA): Initial Experience in the Management of Abnormal Uterine Bleeding

Recommendation:

Accept as it isYES.....

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.

The manuscript titled “**Levonorgestrel Intrauterine System (MIRENA): Initial Experience in the Management of Abnormal Uterine Bleeding**” presents a clinical evaluation of Mirena as a therapeutic alternative for abnormal uterine bleeding (AUB).

The **abstract** is well-structured, providing background context, aim, methodology, results, and conclusion in a concise manner. It clearly highlights Mirena as an effective, non-surgical, and reversible intervention for AUB, capable of reducing menstrual blood loss and preventing hysterectomy in most patients. The results are presented quantitatively, with key findings such as the proportion of patients achieving amenorrhoea, expulsion rates, and the reduction in heavy bleeding.

The **introduction** contextualizes AUB as a significant gynecological concern that impacts women's quality of life and often leads to invasive procedures like hysterectomy. It underscores Mirena's therapeutic role by presenting evidence of its efficacy in reducing menstrual blood loss and its added benefit as a contraceptive. The rationale for the study is clearly articulated, positioning Mirena as a conservative yet effective alternative to surgical management.

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The **methods section** outlines the study design, population, and follow-up intervals. The selection of 42 women aged 30–60 years and the follow-up points at 1 month, 4 months, and 1 year allow for a balanced assessment of short-term and medium-term outcomes. The insertion technique and evaluation criteria are appropriately described, ensuring transparency in the clinical protocol.

The **results** provide a comprehensive overview of patient demographics, etiological distribution of AUB, and outcomes following Mirena insertion. The breakdown of pathology types—dysfunctional uterine bleeding, fibroid, adenomyosis, and endometriosis—adds clinical depth. The retention rate of 83.3% at one year, alongside 47.6% achieving amenorrhoea, demonstrates Mirena's effectiveness. The data regarding expulsion and surgical intervention further highlight its safety and applicability.

The **conclusion** effectively synthesizes the study's findings, reaffirming Mirena's safety, efficacy, and reversibility in AUB management. It emphasizes its role in reducing menstrual blood loss and minimizing the need for hysterectomy, aligning with the study's stated aim.

Overall, the manuscript provides a **clear, systematic, and clinically relevant evaluation** of Mirena in the management of abnormal uterine bleeding, supported by empirical data and framed within a well-defined clinical context.
