

REVIEWER'S REPORT

Manuscript No.: IJAR-53783

Date: 13-09-2025

Title: Scalpel to Scar with Ayurveda: Post-Debridement Application of Kampillaka Taila in a Leprotic Ulcer Case to Avert Amputation □ A Holistic Case Report.

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: **Dr. Aamina**

Reviewer's Comment for Publication

This case report documents the post-debridement management of a chronic leprotic ulcer in a 53-year-old female patient using an integrative Ayurvedic and modern surgical protocol. The work highlights the topical use of *Kampillaka Taila* along with Rasayana therapy (Guduchi, Ashwagandha) and lifestyle interventions to achieve complete healing and avert amputation. The manuscript is well aligned with the journal's aim to explore evidence-based integrative approaches.

Strengths

1. Clinical relevance and originality (Lines 7–29, 149–164):

Chronic neuropathic wounds in leprosy remain challenging to treat. Presenting a case where an Ayurvedic formulation contributed to 98.8 % reduction in ulcer surface area (Lines 221–233) is both timely and novel.

2. Detailed methodology and follow-up (Lines 183–217):

The use of five clinical parameters—pain, surface area, discharge, odor, and granulation color—provides a clear, reproducible framework for assessing healing.

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3. Integration of classical sources with modern science (Lines 91–147, 276–312):

References to Charaka and Sushruta with translations of key verses (e.g., Lines 96–120, 138–140) enrich the cultural context and support the rationale for using Kampillaka Taila.

Areas for Improvement

1. Language and formatting:

- Numerous compound words lack spacing (e.g., “KampillakaTaila” instead of “Kampillaka Taila,” Line 11 and throughout).
- Minor typographical errors and inconsistent capitalization (“OPD of Shalyatantra,” Line 150) should be corrected.
- Some sentences are lengthy and could be simplified for clarity (e.g., Lines 225–234).

2. Scientific framing and discussion:

- Provide more context on the mechanism of *Mallotus philippensis* bioactive compounds and their documented antimicrobial activity (Lines 292–299).
- Expand on how this single-case outcome compares with other integrative or conventional treatments for leprotic ulcers (Lines 276–287).

3. Statistical presentation:

- The Wilcoxon signed-rank test results (Lines 250–261) are appropriate but should include exact p-values and clarify that single-patient data limit generalizability.

4. References:

- Ensure all Ayurvedic texts and modern studies are formatted uniformly and numbered consistently.
- Some citations in the introduction (e.g., Lines 71–95) are incomplete or embedded within the text without a full reference list.

Conclusion

This manuscript successfully demonstrates an integrative, evidence-informed approach to chronic wound care, bridging classical Ayurvedic practice with modern surgery. With minor revisions focused on language editing, standardized references, and slightly deeper comparative discussion, it merits publication and will interest clinicians and researchers in integrative medicine and wound management.

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