ISSN(O): 2320-5407 | ISSN(P): 3107-4928



International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

Manuscript No.: IJAR-54122

Title: Incidental discovery of cardiac myxoma

Recommendation:

Accept as it isyes
Accept after minor revision
Accept after major revision
Do not accept (Reasons below)

Rating	Excel.	Good	Fair	Poor
Originality	ok			
Techn. Quality	ok			
Clarity		ok		
Significance	ok			

Reviewer Name: Dr.Karan Gupta Date: 30.09.2025

Detailed Reviewer's Report

This case report provides a well-organized and insightful look into a relatively rare yet clinically significant condition—cardiac myxoma. The patient's incidental diagnosis of a left atrial myxoma, initially presenting with nonspecific symptoms like dyspnea and a history of atrial fibrillation, adds an important narrative to the existing literature. The report does a solid job of covering the diagnostic approach, imaging techniques, and the ultimate surgical intervention, making it a valuable read for clinicians who may encounter similar cases in their practice.

Strengths:

1. Clinical Relevance:

The case highlights a real-world scenario that many clinicians might face, especially in older patients with cardiovascular risk factors like diabetes and atrial fibrillation. It underscores how a seemingly benign clinical presentation can mask a potentially life-threatening condition, making the need for early detection critical.

2. Clear Diagnostic Pathway:

The use of both echocardiography and cardiac MRI is well-justified. The explanation of how these imaging modalities help distinguish between a thrombus and a tumor is

ISSN(O): 2320-5407 | ISSN(P): 3107-4928

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

practical and easily understood, which could guide clinicians in their decision-making process.

3. Concise Literature Integration:

The brief discussion of the myxoma's epidemiology, its typical location in the left atrium, and the associated risks of complications is helpful. The references to key studies provide context and support the narrative, helping the reader understand why this case is noteworthy.

Areas for Improvement:

1. Language and Flow:

A few phrases could be refined for clarity. For instance:

- In line 6, the sentence "its location can put the patient's prognosis at risk" might be better as "its location can significantly affect the patient's prognosis." This rephrasing emphasizes the severity of the issue.
- Line 7 says, "insidious symptoms often make it difficult to diagnose until the stage of complications," which feels a bit stiff. A more natural phrasing could be "The symptoms are often subtle, making diagnosis challenging until complications arise."

2. Clarifying Clinical Data:

There is a bit of confusion when describing the tumor's characteristics in line 14: "a large sessile pedunculated mass." The terms "sessile" and "pedunculated" are usually used to describe different types of tumor attachment. It would be helpful to clarify whether the mass is sessile, pedunculated, or has features of both. Additionally, when mentioning the size of the mass as "17 cm²" in line 15, it's unclear whether this refers to the area or the actual dimensions of the mass. If the latter, providing the size in centimeters (length x width) would be clearer and more conventional.

3. Consistency and Formatting:

There are a few formatting issues, particularly with the references. For example, "Ann ThoracSurg" should be properly spaced as "Ann Thorac Surg," and some references lack punctuation or proper spacing. These are minor issues but need attention for

ISSN(O): 2320-5407 | ISSN(P): 3107-4928

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

REVIEWER'S REPORT

consistency. Also, consider updating the references to include more recent sources if available, especially since the latest citation is from 1995.

4. Conclusion Section:

The conclusion does a decent job of summarizing the case but could be expanded a little. For instance, adding more about the potential challenges in post-surgical follow-up or the long-term prognosis after resection might provide a more rounded takeaway.

Recommendation:

Minor Revision

This case report is a valuable contribution to the literature, offering practical insights into the diagnosis and management of cardiac myxoma. With some minor adjustments to language, clarity, and formatting, it will be a strong addition to the journal. The topic is both relevant and important, and the report provides useful lessons for clinicians in identifying and managing a condition that may otherwise be overlooked due to its nonspecific symptoms.