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REVIEWER'S REPORT

Manuscript No.: IJAR-54599 Date: 31/10/2025

Title: Non-Bacterial Post-Traumatic Meningitis due to Human Herpesvirus-6 in an Immunocompetent Patient

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

Reviewer Name: Dr. S. K. Nath

Date: 31/10/2025

Reviewer's Comment for Publication:

This manuscript presents a valuable and illustrative case of HHV-6 meningitis in an immunocompetent adult after traumatic brain injury, emphasizing diagnostic approaches and therapeutic considerations. Its strengths lie in clinical relevance, innovative diagnostic discussion, and practical recommendations.

Reviewer's Comment / Report

Strengths:

- 1. **Novelty and Clinical Relevance:** The paper addresses a rare but important clinical scenario HHV-6 meningitis in an immunocompetent adult following traumatic brain injury. Highlighting such cases adds valuable insights, emphasizing the importance of considering viral etiologies in unexplained post-traumatic neurological deterioration.
- 2. **Comprehensive Diagnostic Approach:** The report emphasizes the role of multiplex PCR in diagnosing viral CNS infections, illustrating modern diagnostic advances and advocating for expanding viral panels in specific contexts. This demonstrates a clear understanding of current molecular diagnostic tools.
- 3. **Timely and Practical Recommendations:** The discussion on early lumbar puncture, the interpretation of CSF findings, and pragmatic antiviral management in resource-limited settings are practical takeaways that can influence clinical practice.
- 4. **Literature Integration:** The authors cite relevant literature supporting the discussion about HHV-6's clinical significance, reactivation, and management, providing a well-rounded context for the case.

Weaknesses and Areas for Improvement:

1. Clarity and Readability:

There are occasional grammatical and syntactical issues, such as inconsistent punctuation and sentence structure that disrupt the flow. For example, on page 4, the sentence: "Therapeutic management of HHV-6 CNS infection remains challenging. Ganciclovir and122 foscarnet are the recommended first-line antivirals [4,12]. Their absence in our setting highlights122 disparities in access to essential treatments [15]." could be clearer with sentence restructuring.

2. Typographical and Formatting Errors:

The presence of numerical artifacts within the text (e.g., "in many ICUs," immediately followed by "LP is delayed or avoided in post-traumatic patients...") suggests possible extraction issues from the PDF. Figure captions and references to figures should be consistently formatted for clarity.

3. Incomplete Context and Clarity on the Title and Abstract:

As the provided pages do not include the abstract or full introduction, it's difficult to assess whether the manuscript provides adequate background and motivation upfront.

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4. References Formatting:

The references are numbered but lack bullet or reference list formatting in the provided excerpt. Ensure references are formatted according to the journal's style.

5. Minor Content Clarifications:

Clarify the clinical decision-making process regarding empirical antiviral therapy, especially in resource-limited settings, to strengthen the practical applicability. Briefly elaborate on the possibility of HHV-6 reactivation versus chromosomal integration to contextualize PCR findings better.

Recommendation for the Author:

- Conduct thorough grammatical and typographical editing for clarity and coherence.
- Enhance the presentation of figures and references.
- Expand briefly on the diagnostic challenges and the distinction between reactivation and chromosomal integration of HHV-6.
- Ensure the abstract, introduction, and conclusion are comprehensive and aligned with the case report.