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REVIEWER'S REPORT

Manuscript No.: 55284

Title: Deceptive Oral Lesion in a Child: A Rare Case Report of Tongue Lymphangioma

Recommendation:

Accept as it is
Accept after minor revision.....Yes.....
Accept after major revision
Do not accept (*Reasons below*).....

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

Reviewer Name: Dr. Sireesha Kuruganti

Date: 18/12/2025

Detailed Reviewer's Report

“Deceptive Oral Lesion in a Child: A Rare Case Report of Tongue Lymphangioma”

1. Title & Abstract (Lines 1–15)

- *Strengths:*

- The title is clear and descriptive, highlighting the rarity and clinical challenge.
- Abstract concisely summarizes the case, diagnostic process, and clinical significance.

- *Suggestions:*

- Abstract could briefly mention treatment modalities beyond biopsy (e.g., propranolol, antifungal therapy) for completeness.

2. Keywords (Line 16)

- Keywords are relevant: candidiasis, posterior aspect of tongue, incisional biopsy, lymphangioma.
- *Suggestion:*

3. Introduction (Lines 18–40)

- *Strengths:*

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- Provides historical context (Redenbacher, Virchow) and classification of lymphangiomas (Lines 32–35).
- Epidemiology well stated: 50–70% in head and neck, 90% evident by age 2 (Lines 21–23).
- *Suggestions:*
- Line 29–31: The alternative hypothesis on origin could be expanded with references to recent molecular studies.
- Line 36–39: Add clinical implications of misdiagnosis early in this section.

4. Literature Context (Lines 41–61)

- Mentions syndromic associations (Turner's, Noonan's, etc.) and clinical features (Lines 43–49).
- *Suggestion:*
- Line 50–55: Etiology discussion is good but lacks recent genetic insights; consider adding VEGF pathway relevance here instead of later.

5. Case Report (Lines 63–105)

- *Strengths:*
- Detailed chronology and clinical findings (Lines 84–89).
- Differential diagnosis list (Lines 95–99) is comprehensive.
- *Suggestions:*
- Line 86: White scrapable patches noted—clarify if candidiasis was suspected clinically before biopsy.
- Include patient consent and ethical clearance statement (missing).

6. Histopathology (Lines 107–125)

- *Strengths:*
- Microscopic description is thorough (Lines 109–121).
- Clear correlation between lymphatic spaces and diagnosis.
- *Suggestions:*
- Line 113–114: Candidal hyphae presence—could discuss clinical relevance (secondary infection vs. primary lesion).

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7. Treatment & Management (Lines 126–136)

- *Strengths:*
- Multidisciplinary approach noted (Lines 128–134).
- *Suggestions:*
- Line 132–133: Propranolol therapy rationale is mentioned later; should be briefly introduced here.
- Add follow-up duration and outcome (missing).

8. Discussion (Lines 138–175)

- *Strengths:*
- Good comparison with other lesions (Lines 143–144).
- Treatment options well reviewed (Lines 151–167).
- *Suggestions:*
- Line 147–149: Recurrence rate (39%)—cite source explicitly.
- Line 169–174: Propranolol mechanism is well explained; consider moving part of this to Introduction for better flow.

9. Conclusion (Lines 177–197)

- *Strengths:*
- Emphasizes early diagnosis and interdisciplinary care.
- *Suggestions:*
- Line 183–184: Airway compromise risk—could highlight urgency for pediatricians and dentists.
- Add a statement on prognosis and long-term follow-up.

10. References (Lines 200–229)

- *Strengths:*
- Recent and relevant sources included.
- *Suggestions:*
- Ensure uniform citation style (some URLs vs. DOI inconsistencies).

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Overall Evaluation

- *Novelty:* High (rare pediatric tongue lymphangioma case).
- *Clinical Relevance:* Strong; highlights diagnostic challenges.
- *Areas for Improvement:*
 - Ethical statement, follow-up details, and integration of recent molecular insights.
 - Minor structural adjustments for better flow between sections.