

## REVIEWER'S REPORT

Manuscript No.: IJAR-55402

Title: "Dilated Cardiomyopathy as the Initial Presentation of Cardiac Sarcoidosis in a Young Patient"

### 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 S. K. Nath

Date: 23.12.25

### Detailed Reviewer's Report

#### Strengths of the Paper

- **Clarity and Focus on a Specific Clinical Scenario:** The case is well-described, illustrating the unique presentation of cardiac sarcoidosis as dilated cardiomyopathy in a young patient, which highlights a rare but important clinical entity.
- **Use of Multimodal Imaging:** The paper emphasizes the crucial role of advanced cardiac imaging techniques such as cardiac magnetic resonance imaging (MRI) and thoracoabdominal CT scans in supporting the diagnosis.
- **Clear Therapeutic Approach and Follow-up:** The management strategy, including immunosuppressive therapy and heart failure medications, is detailed with a positive clinical outcome, providing valuable insights for clinicians.
- **Comprehensive Literature Integration:** The discussion references relevant current literature and guidelines, grounding the case in the context of existing knowledge.

#### Weaknesses of the Paper

- **Limited Explanation of Methodology:** As a case report, the methodology section is minimal. However, details about diagnostic criteria, biopsy procedures, or additional laboratory tests could be further clarified.
- **Insufficient Details on Diagnostic Workup:** The rationale for choosing specific tests, such as the decision not to perform FDG-PET, and the exclusion of other differential diagnoses could be elaborated.
- **Lack of Visual Data:** The description of imaging findings is referenced with a figure, but the figure itself is not provided in this excerpt. Including images would significantly strengthen the case.
- **Inconsistencies in Referencing and Formatting:** Some references appear outdated or lack specific details, and formatting inconsistencies are evident throughout the text.

#### Reviewer Comments

- **Ethical Clearance Status:** The paper mentions that written informed consent was obtained from the patient for publication, which is appropriate. However, a statement regarding ethical approval or local institutional review board approval is absent. For case reports, typically, formal ethical approval is not required, but a statement explicitly indicating this would improve clarity.

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- **Issues in Methodology:** The diagnostic process is well-described, but further details about how differential diagnoses were ruled out, and whether endomyocardial biopsy was considered or performed, are lacking. Clarification on these points would enhance the scientific rigor.
- **Typographical Mistakes:** No obvious typographical errors are detected in the provided text. A full review of the technical manuscript is recommended to confirm.
- **Grammar and English Language Quality:** The language is clear and professional, though minor stylistic improvements could be made for conciseness and flow.
- **Formatting Issues:** The formatting is generally acceptable; however, the references section could be better formatted according to journal standards, and figure placement or descriptions should be more precise.
- **Clarity of Objectives, Results, and Conclusion:** The objectives are adequately clear, centered on reporting a rare presentation and discussing diagnostic and therapeutic approaches. Results are well laid out, demonstrating the clinical course and improvement post-treatment. The conclusion effectively summarizes the main points but could reiterate the importance of early recognition.
- **Adequacy of References:** The references are appropriate and relevant, but some are quite recent (2021-2022), suggesting the literature is current. Ensuring all references are correctly formatted is advised.
- **Missing or Incomplete Information:** Including the actual imaging figures referenced would improve comprehension. Details about biopsy procedures or histological confirmation are minimal; clarification or inclusion of biopsy results would strengthen the diagnosis.