

REVIEWER'S REPORT

Manuscript No.: IJAR-55547

Title:

Cutaneous Abscess at the Pacemaker Implantation Site: Clinical and Therapeutic Considerations

Recommendation:

Accept as it isYES.....

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: PROF. DR DILLIP KUMAR MOHAPATRA

Detailed Reviewer's Report

Manuscript Title

Cutaneous Abscess at the Pacemaker Implantation Site: Clinical and Therapeutic Considerations

1. Strengths of the Manuscript

Clinically relevant topic

The manuscript addresses infection of cardiac implantable electronic devices (CIEDs), a recognized but potentially life-threatening complication with increasing incidence due to wider pacemaker use.

Clear case presentation

The clinical history, physical examination findings, laboratory data, and therapeutic approach are presented in a logical and understandable manner.

Elderly patient with comorbidities

Reporting a case in an 84-year-old patient with diabetes and hypertension highlights important risk factors for pacemaker pocket infections.

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Good use of figures

Clinical photographs and aspiration images enhance understanding of the cutaneous presentation and support the diagnosis.

Guideline-consistent management

The discussion appropriately emphasizes complete device management (antibiotics and pacemaker relocation/removal), aligning with established recommendations.

2. Weaknesses of the Manuscript

Limited novelty

Similar case reports of pacemaker pocket abscesses have already been published, including one cited by the authors (Clin Case Rep, 2023). The manuscript does not sufficiently emphasize what makes this case unique.

Microbiological data lacking

Blood and aspirate cultures were negative, but no alternative diagnostic methods (e.g., repeat cultures, molecular tests) are discussed.

Incomplete procedural details

Details regarding the pacemaker relocation (timing, site of re-implantation, temporary pacing if used) are not clearly described.

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Short discussion section

The discussion largely reiterates known infection rates and guidelines, with limited critical comparison to previously published cases.

Ethical considerations not mentioned

There is no explicit statement regarding patient consent for publication of clinical images, which is essential for case reports.

3. *Significance of the Study*

Although this is a **single case report**, the manuscript is significant because it:

Reinforces awareness of **cutaneous manifestations** of CIED infections that may initially present to dermatologists or general physicians.

Highlights the importance of **early recognition and decisive management** to prevent systemic complications.

Serves as a **clinical reminder** that negative cultures do not exclude device-related infection, especially after prior antibiotic exposure.

The paper contributes modestly to existing literature by strengthening clinical vigilance rather than introducing new therapeutic concepts.

4. *Key Points*

Cutaneous abscess over a pacemaker site should always raise suspicion for **CIED pocket infection**.

Elderly patients with diabetes and prior local infections are at **high risk** for pacemaker-related infections.

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Negative microbiological cultures do not rule out infection, particularly after empirical antibiotic therapy.

Complete device management, including removal or relocation, is crucial for infection control.

Early diagnosis and intervention significantly reduce morbidity and mortality associated with CIED infections.