

REVIEWER'S REPORT

Manuscript No.: IJAR-55866

Title: Rare Cervical Paragangliomas: Diagnostic and Therapeutic Challenges in Three Cases

Recommendation:

Accept after major revision

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

Reviewer Name: Dr. Sudheer Aluru

Detailed Reviewer's Report

This is a well-written and clinically instructive case series on a rare and challenging pathology. The manuscript is clear, logically structured, and provides valuable insights into the multidisciplinary management of complex, inoperable cervical paragangliomas. The integration of clinical presentation, advanced imaging, genetic analysis, and the rationale for choosing radiotherapy over surgery is particularly strong. The manuscript is suitable for publication following the correction of several minor but important issues.

Major Comments

1. Case Series Reporting Standards

- The manuscript does not state whether written informed consent was obtained from patients for publication.
- There is no mention of institutional ethics committee approval for publishing the case series.
- CARE reporting guidelines for case reports/series are not referenced or followed.

2. Incomplete and Inconsistent Clinical Data

- Clinical presentation is limited: no neurological examination findings, cranial nerve deficits, blood pressure status, or symptomatology related to catecholamine secretion are described.

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- b. Hormonal work-up is inconsistent: metanephrines are reported variably without specifying plasma vs urinary assays or reference ranges.
- c. Genetic testing is incomplete and uneven across cases; SDHB immunohistochemistry or full germline panels are absent.
- d. Follow-up duration is not clearly stated, particularly for Case 3 (still awaiting treatment).
- e. Shamblin classification is reported but not consistently justified radiologically.

3. Radiotherapy Details Are Insufficient

- a. IMRT is mentioned, but:
 - i. Target volumes (GTV/CTV/PTV) are not described.
 - ii. Organs at risk and dose constraints are not listed.
 - iii. Acute or late toxicities are not reported.

4. Diagnostic Imaging and Figures

- a. Imaging descriptions are incomplete.
- b. Figures are referenced but not adequately explained; no scale bars or arrows identifying lesions.
- c. Figure 4 (Shamblin classification) appears to be generic and its source is not credited.

Minor comments

- 5. Numerous grammatical errors, typos, and formatting problems throughout.
- 6. Repetition and unclear phrasing reduce readability.
- 7. Inconsistent terminology (PGs, HNPGLs, cervical PGs).
- 8. A three-case series is inherently limited.
- 9. No unusual presentation, new imaging approach, novel radiotherapy technique, or long-term outcome is demonstrated.
- 10. The paper largely reiterates established management principles rather than providing new insights.