Review Form3

Book Name:	Achievements and Challenges of Medicine and Medical Science
Manuscript Number:	**Ms_BPR_4177**
Title of the Manuscript:	**Pharmacological Treatment for Constipation-Predominant Irritable Bowel Syndrome: An Updated Review**
Type of the Article	**Book chapter**

PART 1: Comments

	Reviewer's comment	**Author's Feedback***(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimumof 3-4 sentences may be required for this part.	This manuscript serves as a detailed re-evaluation of newest pharmacologic treatments for constipation-dominant irritable bowel syndrome, a multifaceted disorder related to gut-brain interactions. Besides, it takes cognizance of the worldwide prevalence, pathophysiology, economics, and quality-of-life detractors for IBS-C. It has further detailed analysis on pharmacological agents consisting of conventional laxatives, prokinetics, and newer agents, which have significant value for both the scientific and clinical community, as they address gaps in knowledge and possibilities for effective management of IBS-C. This discussion on some advanced therapies and their firm clinical evidence would further embellish the chances for ameliorating outcomes in patients globally.	
Is the title of the article suitable? (If not please suggest an alternative title)	The title is suitable and accurately reflects the content of the manuscript. However, for better clarity, consider revising it to:"Pharmacological Advances in Managing Constipation-Predominant Irritable Bowel Syndrome: A Comprehensive Review"	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	In an effective manner, the abstr act elucidates the manuscript's central thesis. However, following will make it clearer and more comprehensive: • Indicate the precise drug classes discussed in this review, namely secretagogues, bile acid modifiers, and prokinetics. • State briefly the limitations or gaps in the available treatment approaches which this manuscript is meant to address. • The terms reference should be consistent with respect to IBS-C and related types.	
Is the manuscript scientifically, correct? Please write here.	The manuscript scientifically robust provides accurate information. Well supported in the recent and relevant references, the discussion is particularly rich in the pathophysiology section. However: Clear out in introduction and discussion overlapping aspects of IBS-C and chronic idiopathic constipation to avoid confusion for the readers unfamiliar with the topic.	
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form. **-**	The references are recent, relevant, and sufficiently comprehensive. Suggestions: 1. Include more regional studies or meta-analyses to enhance the global applicability of the findings. 2. Highlight clinical trials for emerging treatments with specific focus on their implications for IBS-C.	

Is the language/English quality of the article suitable for scholarly communications?	The text is quite satisfactory for a scholarly audience. Minor changes could make it more concise and grammatically consistent. For example: There might be a need to simplify complex sentences in the introduction and conclusion to improve readability.	
Optional/Generalcomments	The manuscript actually presents a great and updated review of pharmacological treatments of IBS-C while being valuable for clinicians, researchers, and healthcare professionals. **Strengths:** • Well-structured logical organized sections on epidemiology, pathophysiology, treatment options, and emerging therapies. • Impressive inclusion of recent clinical trials and innovations in the therapeutic approach. • Extensive use of references thus ensuring an excellent scientific basis. **Areas for Improvement:** • Extension of the discussion of the overlap between IBS-C and chronic idiopathic constipation to clarify their distinction and similarity. • Brief mention of complementary non-pharmacological treatments-for example diet intervention-enhancing the pharmacological strategies would suffice. • Tables and figures could assist in improving readability and summarization of key information. **Suggestions to Future Work:** • Include patient perspectives or quality of life measures in later reviews. • Highlight barriers toward new treatments acceptability-cost or accessibility-and possible solutions to them. **Final note:** This manuscript fits well into the needs of the scientific community and contributes significantly to the evolving field of IBS-C management. Corrections can be done to make it a reference to be widely cited in this area.The manuscript requires revisions for improved clarity and conciseness.	

PART 2:

	Reviewer's comment	**Author's comment***(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)*
Are there ethical issues in this manuscript?	*(If yes, Kindly please write down the ethical issues here in details)*	

Reviewer Details:

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