|  |  |
| --- | --- |
|  | |
| Book Name: | [**Medical Science: Recent Advances and Applications**](https://bookstore.bookpi.org/product/medical-science-recent-advances-and-applications-vol-1/) |
| Manuscript Number: | **Ms\_BPR\_5766** |
| Title of the Manuscript: | **Negative Appendectomy Rates -An Update** |
| Type of the Article | **Book Chapter** |

**Special note:**

**A research paper already published in a journal can be published as a Book Chapter in an expanded form with proper copyright approval.**

**Source Article:**

**This chapter is an extended version of the article published by the same author(s) in the following journal.**

**Asian Journal of Medicine and Health, 21(10): 7-13, 2023.**

**DOI: 10.9734/ajmah/2023/v21i10873**

|  |  |  |
| --- | --- | --- |
| PART 1: Comments | | |
|  | Reviewer’s comment **Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | 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 minimum of 3-4 sentences may be required for this part.** |  |  |
| **Is the title of the article suitable?**  **(If not please suggest an alternative title)** |  |  |
| 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. |  |  |
| **Is the manuscript scientifically, correct? Please write here.** |  |  |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.**  **-** |  |  |
| Is the language/English quality of the article suitable for scholarly communications? |  |  |
| Optional/General comments | **1.Strengths**  - Wide-ranging review of clinical scoring systems, inflammatory markers, imaging modalities, and laparoscopic surgery in reducing NAR (1996-2024)  - Recent literature covers systematic reviews and meta-analyses, plus regional differences.  - Multimodal approach integrates clinical, biochemical, radiological and surgical approaches to diagnosis.  2. **Weaknesses & Critique:**  a) Lack of Methodological Rigor for a Review:  - Article lacks structured methodology (e.g. PRISMA flowchart, inclusion/exclusion criteria, quality assessment).  - No data on number of articles reviewed or how data was extracted/synthesised.  b) Outdated or Inconsistent Definitions:  - Definition of negative appendectomy inconsistent. While histopathology cited as gold standard, some parts refer to intraoperative appearance, which is outdated and prone to surgeon bias.  - Current literature supports histopathologic confirmation as definitive criterion (Bhangu et al., 2015; Andersson, 2007).  c) Underemphasis on Diagnostic Pathways:  - Paper misses recent guidelines recommending diagnostic pathways combining scoring systems + ultrasound + CT selectively, e.g. World Society of Emergency Surgery (WSES) guidelines (Di Saverio et al., 2020).  - Low-dose CT and MRI absent despite growing role in reducing NAR with minimized radiation exposure in children and pregnant women (Kim et al., 2018).  d) Gender-Specific Considerations Not Explored Deeply:  - It notes that women have higher NARs but fails to critically analyse gynaecological differential diagnoses or the role of gynaecological ultrasound in females of reproductive age.  e) No Discussion on Non-Operative Management:  - Emerging strategies for uncomplicated appendicitis, which could impact NAR, are not discussed (CODA Trial, 2020).  f) Redundancy and Language Issues:  - Several parts of the article are repetitive.  - Grammar, punctuation and syntax need improvement to enhance clarity and readability.  **3. Conclusion:**  While informative and broad in scope, this review would benefit from greater methodological rigor, structured presentation, and deeper engagement with evolving trends like diagnostic algorithms, non-surgical management, and gender-specific challenges. Inclusion of more recent international consensus guidelines and refinement of definitions would also increase its academic quality. |  |

|  |  |  |
| --- | --- | --- |
| **PART 2:** | | |
|  | Reviewer’s comment | Author’s comment *(if agreed with the 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 detail)* |  |

**Reviewer details:**

**Yuksel Dogan, Turkey**