

**Review Form 3**

Journal Name:	<a href="#">Asian Journal of Research in Surgery</a>
Manuscript Number:	Ms_AJRS_126617
Title of the Manuscript:	<b>A Rare Case of Fibrous dysplasia of the External Auditory Canal : Case Report and Literature Review</b>
Type of the Article	<b>Case report</b>

**Review Form 3**

**PART 1: Review Comments**

<b>Compulsory</b> REVISION comments	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
<p><b>Please write a few sentences regarding the importance of this manuscript for the scientific community. Why do you like (or dislike) this manuscript? A minimum of 3-4 sentences may be required for this part.</b></p>	<p>Fibrous dysplasia is a rare pathology characterized by the abnormal growth of fibrous tissue, which can manifest as an isolated condition or as part of craniofacial disorders. When it occurs in the external auditory canal, it presents unique clinical challenges. This slowly growing benign tumor is known for its potential to recur, which raises concerns regarding treatment strategies and patient management. The main points of this report emphasize that imaging plays a crucial role in diagnosis, often allowing for confirmation without the need for biopsy.</p>	
<p><b>Is the title of the article suitable? (If not please suggest an alternative title)</b></p>	<p><b>Yes</b></p>	
<p><b>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.</b></p>	<p><b>Yes</b></p>	
<p><b>Are subsections and structure of the manuscript appropriate?</b></p>	<p><b>Yes</b></p>	
<p><b>Please write a few sentences regarding the scientific correctness of this manuscript. Why do you think that this manuscript is scientifically robust and technically sound? A minimum of 3-4 sentences may be required for this part.</b></p>	<p>A 21-year-old male patient , was referred for right unilateral progressive hearing loss evolving since one year, without any associated signs , the otoscopic examination found a nearly complete stenosis of the right external auditory canal, preventing the visualization of the eardrum. The audiogram revealed a right conductive hearing loss of 60 db. the temporal CT scan showed a significant thinning of the EAC suggesting right fibrous dysplasia of the external auditory canal. The patient was discussed at a staff meeting, the decision of surgical management was made which improved his auditory comfort and enhanced his hearing, with no recurrence observed during his follow-up.</p>	
<p><b>Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.</b></p>	<p>No. All references are five year old. Some recent references must given by the author.</p>	

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<p>Minor REVISION comments</p> <p><b>Is the language/English quality of the article suitable for scholarly communications?</b></p>	<p>No, there are many mistakes in the manuscript which must be removed before publication.</p> <p><b>Conclusion :</b> The main points emphasize that imaging plays a crucial role in diagnosis, often allowing for confirmation without the need for biopsy. Surgical treatment remains a topic of debate, highlighting the importance of selecting the right indications and timing for intervention. A tailored approach to each patient is essential to optimize outcomes and minimize recurrence.</p> <p><b>Keywords :</b> External auditory canal stenosis , external auditory canal fibrous dysplasia, fibrous dysplasia , canaloplasty .</p> <p><b>Case Report :</b> A 21 years old male patient , with no significant medical history , who was referred to our department for right unilateral progressive hypoacusis evolving since 1 year ,without otorrhoea or tinnitus or vertigo or facial paralysis or any other associated signs . All evolving in a context of conservation of the general state. All mistakes are marked red. After full stop don't use small letter or use capital letter when start a new sentence.</p>	
<p>Optional/General comments</p>	<p><b>Manuscript is very well written, recommended for publication in the journal after removal of mistakes.</b></p>	

### 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)
<p><b>Are there ethical issues in this manuscript?</b></p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	

### Reviewer Details:

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