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| Journal Name: | [**Asian Journal of Case Reports in Medicine and Health**](https://journalajcrmh.com/index.php/AJCRMH) |
| Manuscript Number: | **Ms\_AJCRMH\_139809** |
| Title of the Manuscript: | **Lipoma of the corpus callosum in children: A Case Report with Diagnostic Approach and Imaging Review** |
| Type of the Article | **Case report** |

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| PART 1: Comments | | |
|  | Reviewer’s comment **Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | **Author’s Feedback** (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.** | * **The manuscript, "Pediatric Corpus Callosum Lipoma: A Case Report and Diagnostic Imaging Review," significantly contributes to the scientific community by documenting a rare case of a tubulonodular corpus callosum lipoma in a 4-year-old girl presenting with a febrile seizure.** * **It highlights the importance of neuroimaging in pediatric epilepsy, as the 57 × 35 mm non-enhancing, low-density mass with peripheral calcifications was incidentally detected via CT, which also revealed intraventricular extension and occipital horn dilation.** * **The case underscores CT’s role as a non-invasive, accurate diagnostic tool for identifying the fatty nature of such lesions.** * **By advocating conservative management with symptomatic epilepsy control, the manuscript informs treatment decisions, minimizing surgical risks in children.** * **It enhances the limited literature on pediatric intracranial lipomas, refines differential diagnosis, and serves as an educational resource for multidisciplinary teams.** * **This case also emphasizes investigating structural abnormalities in seizure presentations, improving diagnostic and management strategies in pediatric neurology.** | The manuscript presents a rare case of a tubulonodular lipoma of the corpus callosum in a pediatric patient, contributing valuable clinical and radiological insights to the limited literature on this topic. It highlights the importance of brain imaging in children presenting with seizures, especially in identifying congenital malformations that might otherwise go unnoticed. This case also reinforces the diagnostic value of CT scans in detecting fat-containing intracranial lesions and supports conservative management strategies in asymptomatic or minimally symptomatic patients. By sharing this case, we aim to raise awareness among radiologists, pediatricians, and neurologists, and support evidence-based decision-making in similar clinical scenarios |
| **Is the title of the article suitable?**  **(If not please suggest an alternative title)** | **Pediatric Intracranial Lipoma of the Corpus Callosum: Case Report and Diagnostic Imaging Perspectives** | We appreciate the suggested alternative title. However, we believe that the current title accurately reflects both the anatomical location and clinical context of the case. Nonetheless, we are open to adopting the suggested title if the editorial board deems it more suitable. |
| 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. | **The abstract is concise and informative, effectively summarizing the key aspects of the case report. It includes:**   1. **Condition Description: Identifies corpus callosum lipoma as a rare congenital intracranial malformation, often found incidentally.** 2. **Case Details: Describes a 4-year-old girl with a history of epilepsy, presenting with a febrile seizure after medication discontinuation.** 3. **Imaging Findings: Notes the brain CT scan results, highlighting specific features like interhemispheric fatty-density mass, lobulated contours, peripheral calcifications, and ventricular extension.** 4. **Diagnosis: Confirms the diagnosis of tubulonodular lipoma of the corpus callosum based on clinical presentation, imaging, and literature review.** | Thank you for the positive feedback regarding the abstract. We are pleased to know that it effectively conveys the essential elements of the case. If the editorial board wishes for any addition or adjustment, we will be happy to revise it accordingly. |
| Is the manuscript scientifically, correct? Please write here. | **Yes the manuscript scientifically, correct.** | We thank the reviewer for confirming the scientific soundness of our manuscript. We have taken care to ensure all findings are well-supported by current literature and best clinical practices |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.** | **Yes the references sufficient and recent.** | We appreciate the reviewer’s confirmation. Should any additional key references be recommended, we are happy to include them to enrich the discussion. |
| Is the language/English quality of the article suitable for scholarly communications? | **Yes the language is suitable for scholarly communications.** | Thank you for your feedback. We are glad the English language quality is considered suitable. If any editorial refinements are needed, we are ready to make corrections as advised |
| Optional/General comments |  |  |

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| **PART 2:** | | |
|  | **Reviewer’s comment** | **Author’s Feedback** (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)* | here are no ethical issues in this case report. Informed consent for the use of clinical data and images was obtained from the patient’s legal guardian, and all personal identifiers were removed to ensure anonymity. |