

## Review Form 1.6

Journal Name:	<a href="#">Journal of Pharmaceutical Research International</a>
Manuscript Number:	Ms_JPRI_80105
Title of the Manuscript:	Chronic Rhinosinusitis's With Nasal Polyps
Type of the Article	

### General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<https://www.journaljpri.com/index.php/JPRI/editorial-policy>)

[Review Form 1.6](#)

**PART 1:** Review Comments

	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)
<b>Compulsory</b> REVISION comments	<p>Review of Chronic Rhinosinusitis's With Nasal Polyps</p> <p>Chronic Rhinosinusitis-with or without polyps- is a common disorder which has significant morbidity and can significantly lower quality of life. This review seems to be well written, interesting, and easy to understand. While I think this review should make a useful addition to the literature- I have some suggestions which may improve the quality and interest in this paper.</p> <p><b>PHOTOS.</b> If space permits, laryngoscopic/ endoscopic photos of rhinitis with polyps might be interesting to add.</p> <p><b>PROBABLY SHOULD HAVE MORE REFERENCES AND CITATIONS.</b> You list only 20 references in this review. If space permits you should probably cite perhaps 10 to 20 more. This should make your paper may valuable to readers and would save the readers time in looking up more references. If space permits, perhaps you can go through the paper again carefully and add some more references.</p> <p><b>GOOD 2021 PAPER TO CITE</b> A good 2021 review on chronic rhinosinusitis with nasal polyps to cite and perhaps look at references is provided by Bachert et al . (Bachert et al. 2021).</p> <p><b>CONSIDERABLE MORBIDITY OF RHINOSINUSITIS.</b> Although rhinosinusitis is fairly rarely fatal in immunocompetent humans- (some nasal bacteria and fungal infections can be fatal) the morbidity of rhinitis can be significantly. I have one patient who is collecting 100% disability from the US Post Office Due to Rhinitis. One study reported that quality of life impairment of severe rhinitis was similar to moderate asthma, kidney failure, and coronary artery disease .(Soler et al. 2011)</p> <p>Perhaps you can write a little more about the considerably morbidity and loss of quality of life due to rhinitis related problems- and cite several of these papers.</p> <p><b>CRS PROBABLY LINKED TO FUNGI.</b> Although this is controversial topic, many researchers believe that the most common trigger for rhinosinitus problems is exposure to fungi and their mycotoxins and allergens.</p> <p>Ponikau reported that 94 out of 101 (93%) consecutive allergic fungal sinusitis patients met criteria for allergic fungal sinusitis (Ponikau et al. 1999). Another study reported that 44 out of 67 (66%) consecutive fungal sinusitis patients had unilateral or bilateral nasal polyps (Karthikeyan &amp;Nirmal Coumare 2010).</p> <p>Indoor exposure to mold and/or water damage has also been linked to significantly higher risk of rhinosinusitis. A 2013 meta-analysis of 31 published studies reported that indoor exposure to indoor visible mold (OR 1.82, 95% CI 1.56-2.12) and indoor mold odor (OR 2.18, 95% CI 1.76-2.71) were both associated with significantly higher rates of rhinitis (Jaakkola et al. 2013) .</p> <p>Perhaps you may want to say more about the possible fungal links to rhinitis and cite some of these papers.</p> <p>REFERENCES</p> <p>Bachert C, Bhattacharyya N, Desrosiers M, Khan AH (2021): Burden of Disease in Chronic Rhinosinusitis with Nasal Polyps. J Asthma Allergy 14, 127-134</p> <p>Jaakkola MS, Quansah R, Hugg TT, Heikkinen SA, Jaakkola JJ (2013): Association of indoor dampness and molds with rhinitis risk: a systematic review and meta-analysis. J Allergy Clin Immunol 132, 1099-1110.e18</p> <p>Karthikeyan P, Nirmal Coumare V (2010): Incidence and presentation of fungal sinusitis in patient diagnosed with chronic rhinosinusitis. Indian journal of otolaryngology and head and neck surgery : official publication of the Association of Otolaryngologists of</p>	

Review Form 1.6

	India 62, 381-5 Ponikau JU, Sherris DA, Kern EB, Homburger HA, Frigas E, Gaffey TA, Roberts GD (1999): The diagnosis and incidence of allergic fungal sinusitis. Mayo Clin Proc 74, 877-84 Soler ZM, Wittenberg E, Schlosser RJ, Mace JC, Smith TL (2011): Health state utility values in patients undergoing endoscopic sinus surgery. Laryngoscope 121, 2672-8	
<b>Minor</b> REVISION comments	Please see above	
<b>Optional/General</b> comments	Please see above	

**PART 2:**

	<b>Reviewer's comment</b>	<b>Author's comment</b> <i>(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)</i>
<b>Are there ethical issues in this manuscript?</b>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

**Reviewer Details:**

Name:	<b>Luke Curtis</b>
Department, University & Country	<b>East Carolina University, USA</b>