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### PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 78959

**Title:** Apnea caused by retrobulbar anesthesia: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06195029 Position: Peer Reviewer

Academic degree:

**Professional title:** 

**Reviewer's Country/Territory:** Reviewer\_Country

Author's Country/Territory: China

Manuscript submission date: 2022-07-27

**Reviewer chosen by:** AI Technique

Reviewer accepted review: 2022-07-27 14:22

Reviewer performed review: 2022-07-31 14:51

**Review time:** 4 Days

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes []No
Peer-reviewer	Peer-Review: [Y] Anonymous [ ] Onymous



# **Baishideng Publishing**

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statements

Conflicts-of-Interest: [ ] Yes [ Y] No

#### SPECIFIC COMMENTS TO AUTHORS

This is an interesting unique case report referred to apnea caused by retrobulbar anesthesia which is a rare but severe anesthetic complication. Here are my questions and suggestion. Abstract - What is your suggestion for prevention and early identification of brainstem anesthesia such as anesthetic volume, size and length of needle tips, or practical point for observation period after the procedure? Introduction - Consider describing the indication for retrobulbar anesthesia, comparing with topical, peribulbar, and blunt subtenons injections. Case presentation -Has this patient ever received any anesthesia procedures before? Please consider describing in the history section. -

Prior to retrobulbar anesthesia, did this patient receive any narcotics or muscle relaxants? -Please consider describing the actual order for 20% lipid emulsion in this patient. The recommended treatment regimen is an initial bolus of 20% lipid emulsification at a dose of 1mg/kg over 1 minute, followed by 15mL/kg/hr. An anomalous inferior ophthalmic artery can course near the optic nerve, increasing the risk for arterial injection. -Intrasheath injection of the optic nerve can occur with upward deviation of the eyeball, which bends the optic nerve inferiorly and into contact with the advancing needle. - The differentiating factor between intraarterial and intrasheath injection appears to be the speed of symptoms and the development of seizure activity in the former. Intraarterial injection usually causes symptoms seconds after injection, while BSA from a nerve sheath injection occurs over a matter of minutes (5–50 min, avg. 20.5 min, in the published literature) - Please consider adding the discussion about the details of these 2 main mechanisms and how readers can differentiate between these 2 main mechanisms.



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Reviewer's code: 05699643 Position: Peer Reviewer

Academic degree: MSc, PhD

Professional title: Academic Fellow, Associate Professor

Reviewer's Country/Territory: Czech Republic

Author's Country/Territory: China

Manuscript submission date: 2022-07-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-07 10:25

Reviewer performed review: 2022-08-15 08:27

Review time: 7 Days and 22 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No
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Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

It is an interesting case study on the apnea caused by retrobulbar anesthesia. It is a well described case report and may be of interest to medical stuff. Overall, I did not found any significant errors in this work.