

# Review of: "Surgical treatment of Temporal Lobe Epilepsy: comparative results of selective amygdalohippocampectomy versus anterior temporal lobectomy from a referral center in Brazil"

Amany Ragab<sup>1</sup>

<sup>1</sup> Cairo University

**Potential competing interests:** The author(s) declared that no potential competing interests exist.

**Abstract, title, and references:** The aim of the study is clear. What they found and how they did it are also clear. The title is informative & relevant. The references are relevant, referenced correctly, and appropriate but the majority were old. The use of the word "we" in the start of the abstract is not the best, and better replaced by "the authors".

**Introduction/background:** It is clear what is already known about the topic, the research question is clearly outlined.

**Methods:** The process of subject selection is clear. The variables are defined and measured appropriately. The study methods are valid and reliable. No ethical approval or informed consents found (being a retrospective study).

The enrollment of a substantial number of patients (132) is a good point. The study period (20 years) can be a positive point but at the same time, it is difficult to compare between surgeries done over this extended period because the surgical techniques, instruments, and theatres are advancing overtime. Being a retrospective study is a limiting factor also.

**Results:**

The data was presented in an appropriate way. Tables and figures relevant and clearly presented. Appropriate units, rounding, and number of decimals. Titles, columns, and rows labelled correctly and clearly. Categories grouped appropriately.

Regarding the side effects, it is better to refer them to which surgical approach, particularly the memory impairment. And if this memory impairment was related to the type of surgical approach or the hemisphere dominance. This is confounding, especially since the authors did not have a pre surgical cognitive assessment. Also, the presence of infection and the need for craniotomy may increase the risk of seizures.

**Discussion & conclusion:**

The results were discussed from multiple angles and placed into context without being overinterpreted. The conclusions answer the aims of the study. The conclusions supported by results. The limitations of the study open opportunities to inform future research.

**Overall:** The study design was appropriate to answer the aim. This study compared both techniques well with the frequency of seizures being the main outcome. The major flaws of this article I think are being a retrospective with no baseline and post operative assessment of memory and language.

Overall, the article is a great piece of work done with the available patients' records.

The article showed a lot of strong points with a few previously mentioned weak ones.