

Review of: "[Case Report] Ramipril-Induced Angioedema in a Patient With Basal Ganglia Bleed: A Case Report"

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Potential competing interests: No potential competing interests to declare.

The case report titled "Ramipril-Induced Angioedema in a Patient With Basal Ganglia Bleed" provides valuable clinical insights into the management of a serious medication side effect, which is both relevant and important for medical practitioners. However, the presentation and depth of the report could be substantially improved to ensure clarity and enhance its contribution to the medical literature. The narrative could benefit from a revision of several phrases to increase precision and readability. For example, describing the surgical intervention for "a basal ganglia hemorrhage" rather than "basal ganglia bleed" could provide greater technical specificity. Similarly, the description of symptoms as "subsequently developed lip edema, headaches, and irritability" rather than "began to experience symptoms of edema in the lips, headaches, and irritability" would make the clinical progression clearer and easier to follow.

Moreover, the manuscript would greatly benefit from a more thorough integration of relevant literature. Discussing the prevalence and mechanisms of ramipril-induced angioedema in more depth, alongside comparisons with existing case reports, would contextualize this case within broader clinical practice. Additionally, a detailed discussion on the diagnostic criteria that led to identifying ramipril as the cause, as well as the rationale behind the choice of atenolol as a replacement therapy, would strengthen the report. This should include an examination of the decision-making process and any differential diagnoses considered.

Furthermore, the report does not currently provide a follow-up on the patient's long-term outcome post-discharge, which is crucial for understanding the effectiveness and implications of the intervention over time. Including this information would not only complete the narrative but also provide insights into the patient's recovery and quality of life after treatment.

Language and grammatical accuracy also need addressing throughout the document to meet the high standards expected of scholarly communication. It appears that the manuscript has not been reviewed for language by a native English speaker, which has led to some awkward constructions that could potentially mislead or confuse readers. Professional editing would rectify these issues and polish the presentation.

Lastly, it is imperative to confirm and document that ethical guidelines were followed, including obtaining patient consent, especially given the detailed personal health information provided in the case report. Ensuring that these ethical considerations are explicitly addressed in the manuscript is essential for maintaining the integrity of the report.

In conclusion, while the report sheds light on a critical aspect of medication management in post-surgical patients, enhancing the clarity of its language, deepening the contextual and scientific discussion, providing comprehensive

diagnostic and follow-up details, and ensuring ethical compliance are necessary steps to improve its quality and impact. These changes would make the manuscript a more valuable resource for clinicians and researchers alike.