



**SDI FINAL EVALUATION FORM 1.1**

**PART 1:**

Journal Name:	<a href="#">Asian Journal of Case Reports in Medicine and Health</a>
Manuscript Number:	<b>Ms_AJCRMH_40443</b>
Title of the Manuscript:	<b>Early Infantile Gangliosidosis GM1 with B/L pitting edema of lower Limbs</b>
new Title of the Manuscript	<b>EARLY INFANTILE GANGLIOSIDOSIS GM1 , A RARE CLINICAL ENTITY</b>
Type of Article:	<b>Case Study</b>

**PART 2:**

<b>FINAL EVALUATOR'S comments on revised paper (if any)</b>	<b>Authors' response to final evaluator's comments</b>
<p><b>CONCLUSION IS TOO LONG, THE HIGHLIGHTED AREA CAN SUFFICE FOR YOUR CONCLUSION:</b> Since this is a rare clinical entity, therefore it needs to be documented. About 200 cases have been reported to date. The prevalence of GM1 gangliosidosis at birth is estimated to occur in one in 100,000 to 300,000 children.</p> <p><b>This case report emphasizes on reporting of a rare disorder and also focuses in the aspect that can help in diagnosing Gangliosidosis. Clinical and radiological aspects better helps in this regard.</b></p> <p>The clinical aspects in the present case are vertebral changes which includes bilateral lower limb asymmetry and edema. Edema either generalized or present only in lower limbs .Radiological features of the patient includes J shaped sella turcica and anterior beaking of thoracolumbar on X-Ray skeletal survey. Therefore both clinical and radiological aspected can assist in diagnosing Gangliosidosis GM1 in infants.</p>	<ul style="list-style-type: none"> <li>- <b>Corrected as per the worthy suggestion of Author.</b></li> <li>-</li> </ul>