

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 51441

Title: Myocarditis in a 42-year-old man presenting with typical acute myocardial infarction: A case report and literature review

Reviewer's code: 00741994

Position: Editorial Board

Academic degree: PhD

Professional title: Associate Professor

Reviewer's country: Netherlands

Author's country: China

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2019-11-19 13:54

Reviewer performed review: 2019-11-20 16:24

Review time: 1 Day and 2 Hours

| SCIENTIFIC QUALITY | LANGUAGE QUALITY | CONCLUSION | PEER-REVIEWER STATEMENTS |
|---|---|--|---|
| <input type="checkbox"/> Grade A: Excellent | <input type="checkbox"/> Grade A: Priority publishing | <input type="checkbox"/> Accept | Peer-Review: |
| <input type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority) | <input checked="" type="checkbox"/> Anonymous |
| <input checked="" type="checkbox"/> Grade C: Good | polishing | <input type="checkbox"/> Accept | <input type="checkbox"/> Onymous |
| <input type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade C: A great deal of | (General priority) | Peer-reviewer's expertise on the |
| <input type="checkbox"/> Grade E: Do not | language polishing | <input checked="" type="checkbox"/> Minor revision | topic of the manuscript: |
| publish | <input type="checkbox"/> Grade D: Rejection | <input type="checkbox"/> Major revision | <input type="checkbox"/> Advanced |
| | | <input type="checkbox"/> Rejection | <input checked="" type="checkbox"/> General |
| | | | <input type="checkbox"/> No expertise |
| | | | Conflicts-of-Interest: |
| | | | <input type="checkbox"/> Yes |
| | | | <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

My expertise is MRI, so I'll confine my comment to the MRI reporting. In the abstract (line 58) it is stated that after a year fibrosis was better than before, probably meaning less than before. This is speculation based on reduced LGE (line 311). Please stick to the facts! Line 133: showed edema>showed hyperintensities indicating edema. Fig5ABC: unclear due to the use of images made at different angulations. It absolutely necessary to show T2, native T1 and LGE images depicting the same anatomy from similar points of view and scaling, to provide some idea how these MRI results match, that is corroborate each other. As presented now, the MRIs (also in Figs 6,7) merely serve as decoration providing the reader little confirmation of the correctness of the interpretations. The discussion must be shortened.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 51441

Title: Myocarditis in a 42-year-old man presenting with typical acute myocardial infarction: A case report and literature review

Reviewer's code: 00724702

Position: Editorial Board

Academic degree: MBBS, MD

Professional title: Doctor, Senior Researcher

Reviewer's country: India

Author's country: China

Reviewer chosen by: Le Zhang

Reviewer accepted review: 2019-11-18 14:35

Reviewer performed review: 2019-11-29 03:03

Review time: 10 Days and 12 Hours

| SCIENTIFIC QUALITY | LANGUAGE QUALITY | CONCLUSION | PEER-REVIEWER STATEMENTS |
|--|---|--|---|
| <input type="checkbox"/> Grade A: Excellent | <input type="checkbox"/> Grade A: Priority publishing | <input type="checkbox"/> Accept | Peer-Review: |
| <input checked="" type="checkbox"/> Grade B: Very good | <input checked="" type="checkbox"/> Grade B: Minor language | (High priority) | <input checked="" type="checkbox"/> Anonymous |
| <input type="checkbox"/> Grade C: Good | polishing | <input type="checkbox"/> Accept | <input type="checkbox"/> Onymous |
| <input type="checkbox"/> Grade D: Fair | <input type="checkbox"/> Grade C: A great deal of | (General priority) | Peer-reviewer's expertise on the |
| <input type="checkbox"/> Grade E: Do not | language polishing | <input checked="" type="checkbox"/> Minor revision | topic of the manuscript: |
| publish | <input type="checkbox"/> Grade D: Rejection | <input type="checkbox"/> Major revision | <input type="checkbox"/> Advanced |
| | | <input type="checkbox"/> Rejection | <input checked="" type="checkbox"/> General |
| | | | <input type="checkbox"/> No expertise |
| | | | Conflicts-of-Interest: |
| | | | <input type="checkbox"/> Yes |
| | | | <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

1. The authors report that "A notable feature of our case is that we performed CMR three times in 13 months". This appears to be too weak a differentiator from similar cases already published. The uniqueness of this case needs to come out better. 2. The manuscript is well written and well researched. The submission that "early CMR has a strategic role in the differential diagnosis" does add value. 3. The authors can possibly present a flow chart showing workflow in cases mimicking as myocardial infarction with normal Coronary angiography. There has to be justification for delaying CAG for 5 days despite acute symptoms and ECG Changes.

INITIAL REVIEW OF THE MANUSCRIPT

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- ☐ Plagiarism
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No