

December 11, 2021

Dear editor,

Please find attached files of revised manuscript in word format

**Title:** Postoperative Adverse Cardiac Events in Acute Myocardial Infarction with High Thrombus Load and Best Time for Stent Implantation

**Author:** Mingfeng Zhuo<sup>1</sup>, Kelian Zhang<sup>2</sup>, Xuebin Shen<sup>3</sup>, Wencan Lin<sup>4</sup>, Bin Hu<sup>5</sup>, Huapeng Cai<sup>6</sup>, Gang Huang<sup>7</sup>

**Name of Journal:** World Journal of Clinical Cases

**Manuscript NO:**70616

First of all, thank you for your careful guidance of this article. Revision has been made according to the suggestions of the reviewer:

**Reviewer: 06078857**

Thank you very much for asking me to review this manuscript by Mingfeng Zhuo et al. This is a retrospective study to compared delayed stent implantation with emergency percutaneous intervention in terms of myocardial perfusion after stent implantation in 164 patients with acute myocardial infarction and high thrombotic load using univariate and multivariate models. The result of the study is of interest and providing a basis for clinical evaluation of treatment effect and prevention of MACE. Overall, this study was well conducted with good methodology and intelligible English. The number of participants in the study is large enough for a single center retrospective case analysis. The reviewers suggested that the authors could conduct larger sample size studies in the future and further explore the pathogenesis of MACE at the cellular and molecular levels. Congratulations!

**Reviewer: 06078824**

The manuscript written by Mingfeng Zhuo et al. investigated the effects of emergency PCI and delayed stenting in AMI with high thrombotic load and identify factors related to MACE. They analyzed the 12-month follow-up data of 164 AMI with high thrombotic load patients and finally found delayed stent implantation is more beneficial than emergency PCI in improving

postoperative myocardial perfusion in AMI with high thrombotic load, and effectively reduces MACE in these patients. This study is of value for the selection of surgery for AMI with high thrombotic load patients in the future. Very interesting study. And the manuscript is well written. The experiment of the study is designed very well, aims are very clear. Methods are reasonable. Data in tables are very good, and well discussed. Thank you for giving opportunity to review this study.

Thank you for your advice.

After receiving the comments, we read the article carefully and found some small loopholes in the language of the article and made modifications.

Thank you again for publishing our manuscript in the World Journal of Clinical Cases.

Sincerely Yours,

Gang Huang