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PEER-REVIEW REPORT

Name of journal: *World Journal of Cardiology*

Manuscript NO: 80790

Title: Real-world five-year outcomes of FlexyRap® cobalt-chromium rapamycin-eluting stents with biodegradable polymer in patients with de-novo coronary artery disease

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00069192
Position: Peer Reviewer
Academic degree: MD
Professional title: Chief Physician
Reviewer's Country/Territory: China
Author's Country/Territory: India

Manuscript submission date: 2022-11-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-11-08 07:26

Reviewer performed review: 2022-11-08 09:00

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[Y] Yes [ ] No

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Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors evaluated the safety and effectiveness of FlexyRap®DES through a retrospective, multicenter, observational study in the real environment for 5 years. The success implantation rate of FlexyRap® DES was 100%. During the 1-year, 3-year and 5-year follow-up, the incidence of major adverse cardiac events was relatively low, which confirmed that FlexyRap ®DES is safe and effective in patients with new coronary heart disease. However, the research still has the following problems: 1. Compared with previous RCT studies of rapamycin eluting stent, the incidence of major adverse cardiac events in this study was significantly lower. The difference cannot be explained by product characteristics. The author needs to make a detailed comparison with previous studies in the discussion section. 2. The population included in this study is the target vessel disease with diameter stenosis ≥ 50%, which is far less than the surgical indication for stent implantation. Therefore, is it appropriate to evaluate the success rate of the device as 100%? 3. Are the patients included in this study all qualified patients, or are they selected artificially? The author should draw a flow chart and specify the inclusion criteria and exclusion criteria.

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Reviewer's code: 03497479
Position: Editorial Board
Academic degree: MD, PhD
Professional title: Full Professor
Reviewer's Country/Territory: Croatia
Author's Country/Territory: India

Manuscript submission date: 2022-11-06

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-12-11 09:02

Reviewer performed review: 2022-12-11 10:15

Review time: 1 Hour

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ ] Minor revision [Y] Major revision [ ] Rejection
Re-review	[ ] Yes [Y] No

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Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

I read with interest the article "Real-world five-year outcomes of FlexyRap® cobalt-chromium rapamycin-eluting stents with biodegradable polymer in patients with de-novo coronary artery disease". It is a retrospective, multi-center, observational, post-market clinical follow-up study of individuals treated with FlexyRap® DES for de novo coronary artery disease (CAD). The results of the study are encouraging and interesting considering the very low MACE rate. There are numerous methodological problems; 1. cohort of CAD patients is heterogeneous - pts. with stable and unstable AP. 4. basic characteristics of CAD patients are very atypical?!; dyslipidaemia 0%??, DM only 14%, low percentage of smokers?, PAD 0% (how and were they evaluated with CDFI of carotid artery or ABI? 2. no morphological evaluation of the coronary arteries was performed during the follow-up period either by classic coronary angiography or CCTA, but only MACE was monitored. 3. patients were treated with clopidogrel or prasugrel, and prasugrel is known to be superior to clopidogrel, which could have led to bias. A subanalysis of these groups of patients is needed 4. Minor comment: check all the data in the tables where there are illogicalities (lower systolic compared to diastolic BP, etc.). Some data in the tables are unnecessary and can be omitted.