

Editorial Office  
Li-Jun Cui, Science-Editor  
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**Briefpost**  
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18.04.2018 **Datum**

**RE: Prognostic utility of global longitudinal strain in myocardial infarction** by Schuster et al.  
for the World Journal of Cardiology.

Dear Editor Li-Jun Cui,  
Dear Reviewers,

Thank-you for the feedback we received on a previous version of our manuscript entitled  
"Prognostic utility of global longitudinal strain in myocardial infarction".

The comments were very helpful and we have incorporated them into this version. We feel that the  
manuscript has been strengthened further as a result. We made the following changes according  
to the suggestions made:

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#### Reviewer #1

I think that the evidence is still inadequate to conclude that CMR-FT risk stratification should be  
incorporated within routine CMR imaging protocols following AMI.

We fully agree that additional prospective clinical trials are needed to substantiate the additional  
value of CMR-FT in patients after myocardial infarction. We rephrased our conclusion carefully to  
meet the current evidence. However, with current data pointing towards the additional benefits  
beyond established markers, we feel that this editorial will be of interest to a broad readership.

#### Reviewer #2

This submission discusses the results obtained by a recent publication of the authors in the use of

global longitudinal strain (GLS) measurements after acute myocardial infarction in STEMI and non STEMI patients in comparison with prior data obtained by Gavara et al. on a similar topic. The authors have done a nice job of presenting the data in context and explain possible reasons for discrepancy between the two datasets. The submission however cannot be called an editorial and has a feel that is more similar to a "letter to the editor" and should be reclassified as such. I would additionally suggest adding a paragraph after the introductory paragraph also describing the similarities in the results between the two papers to provide the audience with a fuller picture. The authors should also tone down the conclusion regarding their paper as much more work is needed before GLS can be used routinely as a prognostic tool after acute myocardial infarction.

We added information on similarities between the two papers to provide a clearer understanding of the current data available. Since additional adequately powered studies are needed for widespread adoption of CMR-FT myocardial deformation assessments into clinical routine, we followed the advise of both reviewers and rephrased our conclusion carefully. However, since we address a current challenge in the field of imaging in AMI and specifically deformation quantification and its predictive power for hard clinical events, we believe that an Editorial was the appropriate choice as per the instructions for authors within the World Journal of Cardiology.

We have revised the manuscript according to the valuable suggestions of the reviewers. We hope that these changes will meet with your approval.

Thank you for your kind consideration.  
Sincerely

Prof. Dr. Andreas Schuster, MD PhD MBA FESC FACC  
**Editorial Board Member World Journal of Cardiology**