

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 62182

**Title:** Interpersonal violence: Serious sequelae for heart disease in women

**Reviewer's code:** 05410414

**Position:** Peer Reviewer

**Academic degree:** BSc

**Professional title:** Doctor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2020-12-31

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2021-03-06 16:18

**Reviewer performed review:** 2021-03-06 17:00

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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## **SPECIFIC COMMENTS TO AUTHORS**

1) General diction and flow can be improved for improved readability. This critique is mutually exclusive from the content of itself but it would be appreciated. 2) There are limitations in expanding the significance of statements to fit the overall theme of the manuscript. For example, "Scott-Storey [4] developed a conceptual model to describe direct and indirect pathways by which severity of lifetime abuse (physical, sexual, psychological) may affect women's cardiovascular risk." It is hard to delienate whether the model's construct was part of the subsequent statements made or was just a singular statement to inform that Scott-Storey developed a model. If so, perhaps an edpansion delienating the model's premise, how it fits with the overall manuscript, whyit was included i the mauscript. 3) The statement, "Many studies have shown the link between the cardiovascular system and depression. Depression is an independent risk factor for the development of cardiovascular diseases and contributes to a worse prognosis, further increasing the risk of mortality or subsequent cardiac events [5,6]". I can retrieve from the references the aforementioned cardiac events, but do they fall within a family of what are called "Major Adverse Cardiovascular Events" (MACE)? If so, perhaps when describing such adverse events, the term MACE can be included as it is a significant cardiovascular term with implications that may give your manuscripts significant credence to be a launching pad where further trials can define endpoints and cite this paper as the impetus or inspiration for future research in the domains that intersect with women's health and cardiovascular disease. 4) The header "Increased concerns about domestic violence during the COVID-19 pandemic" is a very strong topic that I believe meets a scientific as well as moral criterion for dissemination of academic content. My concern is that due to the interest in COVID-19 academic work in journal, readership my view it is of scoring "low hanging fruit" for authorship as many manuscripts including COVID-19 material subsequently reach publication. I believe the



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authors (and the authors are at liberty to argue against this suggestion if they have a well enough case) is that that section should be redesigned to where moments of increased isolation bring about heightened concern for opportunities for interpersonal violence, and then citing COVID-19 as a contemporary example. I understand that "COVID-19 is a once in a lifetime" moment, however, If the authors wish to keep the current format, then examples or accounts of other moments throughout history where mobility has been decreased and there has been observed cardiovascular implications. Doing so is a challenge so if examples cannot be found in the literature, I believe at least a commentary on such phenomenon should be noted. 5) I believe that the physiology explaining chronic stress experienced during interpersonal violence is definitely one that warrants inclusion in the author's manuscript. However, I believe that the explanations of the pathways are not rigorous enough. For example, what metabolic or neuroendocrine factors are modulated during the process of interpersonal violence? How do these affect for example vascular compliance, left ventricular hypertrophy, thrombi formation. These objective pathways help balance the plentiful "it is possible" or "could be" statements seen throughout the manuscript and I believe give it more credibility. 6) Can the authors explain the statement, "Besides, various studies have documented associations among violence exposures and tobacco use, alcohol use, poor dietary habits, and sedentary lifestyle, all mechanisms potentially linked to cardiovascular health." and how it relates to the title of "Interpersonal Violence: Serious Sequelae for Heart Disease in Women"? Its inclusion comes at the end of a paragraph and comes off as rather out of place. It should be deleted if no follow-up statements can be provided. 7) Overall, the manuscript seems to be a call for awareness or speculation heavy, without many recommendations given. The authors themselves come from esteemed backgrounds such as psychiatry, cardiology, medicine, etc. and there looks to be an opportunity for a manuscript that changes perspectives throughout the



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pandemic. I believe there should at least be some for of solution-based recommendations discussed. If I have missed these, please highlight them. 8) Sequelae of heart disease in general, with some exceptions (i.e, cocaine induced arrhythmia) happen over time. For example, increased sugar intake can lead to vascular changes that promote atheromas and atherosclerosis, which can rupture and cause a major adverse cardiovascular event. Such an event is unlikely to happen if I eat a slice of cake, or if I eat a slice of cake daily for a year or two (which seems to be the course duration of the pandemic). However, in well established atherosclerotic patients with type 2 diabetes mellitus who practice poor dietary habits, a retrospective audit of lifestyle can help delineate the risks in the interim. I bring about this example to suggest that the authors include some form of commentary on the importance of assessing women who are victims of interpersonal violence throughout this pandemic and what happens 5, 10, 20, etc. years from now. Such a suggestion helps lend credibility that this topic too, is an area that should be studied once this pandemic ends and we can see the longlasting impact it has created.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 62182

**Title:** Interpersonal violence: Serious sequelae for heart disease in women

**Reviewer's code:** 02545023

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** United States

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2020-12-31

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2021-02-26 16:05

**Reviewer performed review:** 2021-03-16 03:31

**Review time:** 17 Days and 11 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

Overall, it is a well-written mini-review that summarized the impact of intimate partner violence on the cardiovascular health of woman victims. However, there are quite a few misspellings that need to be corrected, as listed below (part of them): Page 2, paragraph 2, first sentence: “known” - should be “known” Page 2, paragraph 4, second sentence: “contribute to create” - should be “contribute to creating or creation of ” “flight-or-flight” - Should be “fight-or-flight” Page 3, paragraph 1, Thirdly - Should be “Third”, to be consistent with “Second” in previous sentence. hypotesized - Should be “hypothesized” Page 3, paragraph 2, analized - Should be “analyzed” Page 5, paragraph 1, esacerbate - Should be “exacerbate” hoplessness - Should be “hopelessness” Page 6, last paragraph, resonses - Responses? Resources?