

PEER-REVIEW REPORT

Name of journal: *World Journal of Cardiology*

Manuscript NO: 79605

Title: Does the intracoronary pressure differ according to two types (diffuse or focal) of coronary spasm?

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06369714

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor, Lecturer, Senior Postdoctoral Fellow

Reviewer's Country/Territory: United States

Author's Country/Territory: Japan

Manuscript submission date: 2022-08-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-09-12 00:29

Reviewer performed review: 2022-09-24 22:55

Review time: 12 Days and 22 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important novelty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important creativity or innovation?

	<input type="checkbox"/> [J31] Yes <input type="checkbox"/> [J30] No Does this manuscript use reliable research methods? <input type="checkbox"/> [J41] Yes <input type="checkbox"/> [J40] No Are the manuscript-accompanying data and figures authentic? <input type="checkbox"/> [J51] Yes <input type="checkbox"/> [J50] No Does this manuscript make scientifically significant conclusions? <input type="checkbox"/> [J61] Yes <input type="checkbox"/> [J60] No
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> [Y] Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> [Y] Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> [Y] Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> [Y] Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an observational, retrospective study on using pressure wire during spasm provocation test in patients with VSA and exploring whether there is difference of intracoronary pressure among diffuse or focal spasm patients. Their results showed that a higher frequency of metabolic syndrome and coronary atherosclerosis in patients with VSA and focal spasm. Major comments are below: 1. This clinical study is generally well done, the main concern is whether there is other non-invasive imaging strategy in evaluating the disease severity, for example CTA. 2. Authors discuss about the severity of myocardial ischemia caused by focal spasm stress, is there any direct clinical manifest data of myocardial ischemia, for example Troponin, CKMB level? 3. Can authors discuss the fact that Calcium-channel blocker medication is significant in the focal spasm group? 4. It appears that in the focal spasm group, there are more cases of high dose ACh



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inducing, does it cause certain bias in the p value? Minor comment: Table 1 Group S should be Group F

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Reviewer's code: 06154236

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor, Senior Researcher

Reviewer's Country/Territory: Russia

Author's Country/Territory: Japan

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Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-11-05 18:28

Reviewer performed review: 2022-11-15 07:07

Review time: 9 Days and 12 Hours

Scientific quality	<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
Judgment by peer reviewers	Does this manuscript meet the code of ethics standards? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important novelty? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does this manuscript have important creativity or innovation?

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Re-review	<input checked="" type="checkbox"/> [Y] Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> [Y] Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> [Y] No

SPECIFIC COMMENTS TO AUTHORS

(1) The manuscript is indeed important as it addresses one of the key issues in cardiology, i.e. coronary spasm leading to myocardial ischemia. Authors aimed to investigate whether the intracoronary pressure differed in the settings of diffuse or focal coronary spasm. Differential diagnosis between the two may possibly lead to new approaches to treatment including cases of INOCA and MINOCA. (2) The article did reveal the differences between the severity of coronary spasm in two endotypes, diffuse and focal. It would be interesting to understand the way this spasm corresponds to the clinical symptoms of ischemia and myocardial ischemia, i.e. the results of myocardial scintigraphy or echocardiography, or responds to different treatments. Overall, the manuscript is well written, is concise and presented in an acceptable manner. However, several questions arose. The authors are asked to: 1). address the issue of non-invasive

testing such as ergonovine echocardiography etc. as an alternative or addition to invasive testing. 2). report complication rates following coronary angiography, if there were any. 3). report whether any of the patients had myocardial bridging.