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PEER-REVIEW REPORT

Name of journal: *World Journal of Cardiology*

Manuscript NO: 90088

Title: Unveiling the Silent Link: Normal-Tension Glaucoma's Enigmatic Bond with Cardiac Blood Flow

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03991164

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Switzerland

Author's Country/Territory: India

Manuscript submission date: 2023-11-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-11-23 07:44

Reviewer performed review: 2023-11-23 10:53

Review time: 3 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> 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"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors deal with an important topic. They describe the interesting connection between vascular factors and the NTG. The manuscript however could be improved considerably by making a few small changes. I therefore like to make some suggestions to the authors: The authors should differentiate the influence of factors such as diabetes or arterial hypertension on IOP from a direct influence on glaucoma damage. See e.g. PMID: 33074964 Many important terms should either be more clearly defined or correctly referenced, such as vascular dysregulation (see: PMID: 23742177) or Flammer syndrome (PMID: 25075228). HRV is interesting. However, it should be mentioned that it cannot simply be the cause of vascular dysregulation, as this vascular dysregulation can also be observed and measured in the non-innervated retinal blood vessels using the dynamic vessel analyzer. However, vascular endothelial cells play an important role for vascular dysregulation (see e.g.: PMID: 28824736) Our current research and knowledge are based on what our ancestors have already built up. It would therefore be appropriate to point this out, e. g: PMID: 12150988 Ideally, retinal venous pressure should also be discussed in connection with perfusion pressure (e.g. PMID: 26504500) With CCBs, a

distinction should be made between the normal dose used to treat arterial hypertension and the much smaller dose used to treat vascular dysregulation. (See e.g.: PMID: 34575340) In the case of beta-blockers, it could be pointed out that there are important differences between the various beta-blockers (PMID: 19733652)