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**KING'S**  
*College*  
**LONDON**  

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**University of London**

21 January 2016

Dear Sir/Madam

**RE: Manuscript ESPS NO 23509 – “Coronary artery anomalies overview: the normal and the abnormal”**

We thank the Editor and the Referees for their thorough and constructive reviews of our manuscript. We have addressed all the reviewers' comments and would like to submit a revised manuscript to *World Journal of Radiology*. Please find below our responses to each individual comment.

### **Reviewer #1**

*This is a very comprehensive review of a topic that has been well covered in the literature. The manuscript reads like a book chapter, and should be shortened by 50% to make it legible for the readers of a general radiology journal. The illustrations are very nice and cover the topic well.*

We thank the Reviewer for this comment. We feel that shortening the review by 50% would significantly reduce the quality of the article, not allowing us a systematic review of this complex topic. The possibility to publish without limitations in the number of pages submitted is one of the reasons why we thought that the World Journal of Radiology was the most appropriate to publish our review. However, in order to improve the presentation of the content and to come to a reasonable compromise with the Reviewer's request, we have shortened the paper significantly 20%. We hope you will find this solution reasonable.

### **Reviewer #2**

*The manuscript provides a good overview over coronary artery anomalies.*

We thank the Reviewer.

### **Reviewer #3**

*I think that this is a fantastic review on the role of anatomical imaging by means of angio CT and MR for the study of coronary anatomy*

We thank the Reviewer.

### **Reviewer #4**

*It may be of importance to add the following publication to the imaging section of the manuscript: It has been demonstrated by Ghadri et al., that the prevalence of congenital coronary anomalies detected by CCTA is higher compared with conventional CAG. But in case of anomalies of termination (e.g. CAFs), conventional CAG (8.9%) detected more fistulas than CCTA (4.3%), the difference is not statistically significant ( $p = 0.17$ )[J.R.Ghadri, E.Kazakauskaitė, S.Braunschweig, I.Burger, M.Frank, M.Fiechter, C.Gebhard, T.A.Fuchs, C.Templin, O.Gaemperli, T.F.Luscher, C.Schmied, P.A.Kaufmann, Congenital coronary anomalies detected by coronary computed tomography compared to invasive coronary angiography, BMC.Cardiovasc Disord.14 (2014) 81.].*

*Minor comments: Page 19: Line 8: Baltaxe and Wixson instead of Baitaxe and Wixson Page 20: 21: Baltaxe and Wixson is reference 41 instead of 39.*

We thank the Reviewer for his/her interesting comments. We added a reference to the paper by Ghadri and colleagues in the imaging section. We also amended the reference for Baitaxe and fixed the wrong references.

#### **Reviewer #5**

*This is an excellent review about the coronary artery anomalies. This manuscript is nicely structured and well written. I have a few minor comments about this manuscript. Please consider the following comments. (Comments) 1. Page 10, line 19, Morales and colleagues [14] Page 10, line 30, Ferreira and colleagues [4] Page 11, line 2, Leon and colleagues [14] or [13] I think the authors probably make a mistake. Reference seems to be wrong. Morales AR, et al. Intramural left anterior descending coronary artery: significance of the depth of the muscular tunnel. Hum Pathol. 1992;23:129-37. Ferreira AG Jr, et al. Myocardial bridges: morphological and functional aspects. Br Heart J. 1991;66:364-7. Leon F, et al. Daughter, you broke my heart: accidental thrombosis at a muscular bridge. Tex Heart Inst J. 2006;33:380-2. Sorry if I have got it wrong. 2. Page 20, Anomalies of origin of LAD, line 4 Correct "Baltaxe and Wixson [39]" to "Baltaxe and Wixson [41]". 3. References [1] Correct to "Chiu IS". [20] Correct to "Lee VV". [30] Correct to "Bloor CM, Mueller FO". [33] Correct "Venturini E, Magni L". [35] Correct "Cacici G, Angelini P". [41] Correct to "Baltaxe HA". [42] Correct "Jaquiss RD". [50] Correct to "Said SA, van der-Werf T".*

We thank the Reviewer for his/her useful comments. We noticed there has been a problem with the references and amended all the mistakes.

#### **Reviewer #6**

*It is a paper about coronary artery anomalies I have some suggestions: I would change the title for "Coronary artery anomalies overview" Tables: Please include the Legends before the Tables. Please, homogenize the abbreviations and include a list of abbreviations Please, change Fig 15. Please, review the reference list. They are duplicated.*

We thank the Reviewer for his/her useful comments. We changed the title as "Coronary artery anomalies overview: the normal and the abnormal". We moved the legends before the tables. We also checked and corrected the abbreviations and included a list of the abbreviations used and amended figure 15. We noticed there has been a problem with the references and amended all the mistakes.

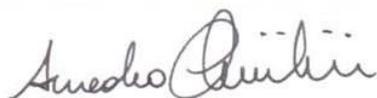
#### **Reviewer #7**

*The manuscript is well-written and well-researched. The authors must be congratulated for producing a very comprehensive account of a clinically important topic. In the opinion of this reviewer the quality of the manuscript will be further enhanced if the authors include Table 4 (not present in the current version of the manuscript) and review the list of references (duplication).*

We thank the Reviewer for his/her useful comments. All the 4 tables are now included in the manuscript. We noticed there has been a problem with the references and amended it.

We look forward to hearing from you.

Yours sincerely,



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