

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 31101

Title: Entirely subcutaneous defibrillator and complex congenital heart disease: data on long-term clinical follow up

Reviewer's code: 00214291

Reviewer's country: Germany

Science editor: Xiu-Xia Song

Date sent for review: 2017-01-01

Date reviewed: 2017-01-02

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Interesting

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 31101

Title: Entirely subcutaneous defibrillator and complex congenital heart disease: data on long-term clinical follow up

Reviewer's code: 00722526

Reviewer's country: Italy

Science editor: Xiu-Xia Song

Date sent for review: 2017-01-01

Date reviewed: 2017-01-02

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Very interesting and well written article. It gives an important overview of the topic in a subgroup of very complex patients. The manuscript is suitable for publication

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 31101

Title: Entirely subcutaneous defibrillator and complex congenital heart disease: data on long-term clinical follow up

Reviewer's code: 00742373

Reviewer's country: United States

Science editor: Xiu-Xia Song

Date sent for review: 2017-01-01

Date reviewed: 2017-01-04

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The study followed up the outcomes of Subcutaneous implantable cardiac device (sICD) in 8 patients with complicated congenital heart disease in two medical centers since this kind of patients may be difficult for endocardial device because of the complicated anatomy. Results demonstrated a smooth outcome for patients through a long time followup except a few complications. The author concluded that the sICD is effective and safe method in patients with complex congenital heart disease. ICD will have more practical use in clinic. The vast majority of patients needing ICD therapy are suitable candidates for S-ICD implantation. Nevertheless, it currently seems to be preferentially adopted for secondary prevention of sudden death in young patients with channelopathies. So it is significant to followup sICD outcomes. This study investigated the patients situation after sICD in some certain patients. It is helpful for the clinical researchers clinicians to choice sICD for further study or in complex congenital heart disease. Suggestions: * Writing correction: Discussion, screening issues, paragraph 1,

line 4-5. "These features have , have been reported as a risk factor for ECG screening failure in the S-CD." * In the discussion, there author has a section about the pacemaker requirement for some patients. But we didn't see the related information about the pacemaker in these 8 patients. Reviewer suggest to add that if there is any patient with pacemaker and describe the detail outcomes of the patient. * Move the table title up to above the table, keep the notes under the table. * Reorganize figure 1. Move "Figure 1" out of the picture and put it under the figure together with the descriptions. * The author also pointed out the limitations of this study. Low number of patients is one of them. No matched group for control is also one. However, for the patient with complicated congenital heart disease, sICD seems a better choice than endocardial ICD.

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 31101

Title: Entirely subcutaneous defibrillator and complex congenital heart disease: data on long-term clinical follow up

Reviewer's code: 00608305

Reviewer's country: Poland

Science editor: Xiu-Xia Song

Date sent for review: 2017-01-01

Date reviewed: 2017-01-08

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
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		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Dear Authors this is a well written retrospective bicenter observational study of a subcutaneous defibrillator in pts with CHD and difficult anatomy. A drawback is a very limited population observed however observation time is rather long. Relatively low number of intervention was observed which do not allow any conclusions of efficacy

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 31101

Title: Entirely subcutaneous defibrillator and complex congenital heart disease: data on long-term clinical follow up

Reviewer's code: 00258135

Reviewer's country: Italy

Science editor: Xiu-Xia Song

Date sent for review: 2017-01-01

Date reviewed: 2017-01-12

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The paper of Ferrero and coll. is very interesting although limited by the small sample of patients. Moreover, some points should be clarified by the authors. ? Pease provide the number of screened patients in order to understand the percentage of population with congenital heart disease which requires a subcutaneous implantation. ? Please discuss the rate of supraventricular tachycardia in a half of patients and its possible influence on subcutaneous ICD inappropriate shocks. ? The authors can not draw any conclusion about the rate of appropriate intervention of ICD, which should include not only subcutaneous cardioverter defibrillator. ? Please, provide in the table data about follow-up duration for each patient.