

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 40848

Title: Revisiting endovascular treatment in BTK. Are DES the best option?

Reviewer's code: 00060496

Reviewer's country: Italy

Science editor: Ying Dou

Date sent for review: 2018-07-16

Date reviewed: 2018-07-16

Review time: 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input checked="" type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The authors report an interesting editorial on drug-eluting stents for below-the-knee revascularization. Despite the work strengths, I recommend addressing the following comments: 1. Add one or more tables summarizing the alternative therapies for BTK intervention. 2. Add one or more tables summarizing the key evidence sources on



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alternative therapies for BTK intervention. 3. Quote other references from other authors/institutions to provide a more balanced perspective on BTK intervention.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ Yes
- ☐ No

BPG Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ Yes
- ☐ No

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 40848

Title: Revisiting endovascular treatment in BTK. Are DES the best option?

Reviewer's code: 02729101

Reviewer's country: Italy

Science editor: Ying Dou

Date sent for review: 2018-07-13

Date reviewed: 2018-07-26

Review time: 13 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input checked="" type="checkbox"/> Yes
			<input type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The paper is interesting and offers to non interventional clinicians useful information in order to treat BTK critical lesions. As stated by authors POAD is more frequent and severe in diabetes and kidney failure . Have they any data comparing results in diabetic patients to those of non diabetics . Which was the incidence of diabetes in the



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populations reported iun the meta analysis of Katsanos et al.

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- ☐ No