

To
The Editor-in-Chief, World Journal of Cardiology

September 5th 2018,
Rochester.

Subj: Manuscript revision

Dear Editor,

We read the reviewer comments on our manuscript with great interest. Thank you very much for taking the time to review our manuscript. We sincerely appreciate the meticulous effort put forward to improve the current draft. We hereby enclose our detailed responses.

SPECIFIC COMMENTS TO AUTHORS

The authors, Atti and colleagues describe in A Systematic Review and Meta-Analysis the place of routine surgical left atrial appendage occlusion during concomitant cardiac surgery. However, there are some issues which should be dealt with to increase the readability and structure of the manuscript. There are some minor errors: - Throughout the manuscript, references in text should be in square brackets and superscript at the end of the sentence [0]. - Period and comma are missing after et al., throughout the manuscript. - References should be arranged according to the requirements of the Journal. - On page 7: Valve surgery: Garcia-Fernandez [3], Nagpal [8], Lee [5] and Elbadawi [12] are cited without mentioning the reference. - CABG: Healey [7], and Elbadawi [11]. - Table 1: In the first column to the left: By adding the reference to the study mentioned will increase clarity. - Table 2: In the first column to the left: The year and references are missing. - Table 3: In the first column to the left: References are missing. - Page 17: Separate Table legends are not necessary.

Thank you very much for the comment. We changed the references to the recommended format. We included the reference numbers in the tables as recommended. We removed the table legends in page 17 as recommended.

SPECIFIC COMMENTS TO AUTHORS

this is well written, well done systematic review and meta-analysis of an important topic the question what to do with the LAA is pending already for years the limitations are well documented, mainly the absence of long term follow-up although surgical closure rates are not discusses , different surgical techniques could give different complete closure of LAA, results are there message is important

Thank you very much for pointing out the study significance. We sincerely appreciate your efforts to improve the current draft.

Please direct all correspondences to:

Mahesh Anantha Narayanan, MD

Division of Cardiovascular Diseases,
Department of Medicine, University of Minnesota,
420 Delaware St SE, Minneapolis, MN 55455, United States.

Telephone: +1-612-6262451

Fax: +1-612-6264411

Email: - manatha@umn.edu