



**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 48735

**Title:** Diagnosis of myocardial infarction with nonobstructive coronary arteries in a young male in the setting of acute myocardial infarction post-endoscopic retrograde cholangiopancreatography: A case report

**Reviewer’s code:** 03726743

**Reviewer’s country:** United States

**Science editor:** Jin-Lei Wang

**Reviewer accepted review:** 2019-06-09 15:01

**Reviewer performed review:** 2019-06-10 00:14

**Review time:** 9 Hours

| 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 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 checked="" 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 checked="" type="checkbox"/> Advanced  |
|  |  | <input type="checkbox"/> Rejection                 | <input type="checkbox"/> General              |
|  |  |  | <input type="checkbox"/> No expertise         |
|  |  |  | Conflicts-of-Interest:                        |
|  |  |  | <input type="checkbox"/> Yes                  |
|  |  |  | <input checked="" type="checkbox"/> No        |

**SPECIFIC COMMENTS TO AUTHORS**

This is an interesting report. Just like how ERCP (or the underlying illness requiring this intervention) can trigger acute myocardial infarction, it seems reasonable to believe



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that the same association could exist with ERCP and MINOCA. Thus whether there is vascular occlusion or not may not be of critical importance, the acute stressor may impact susceptible individuals either way. On the other hand, it is possible that the acute cardiac issues were completely coincidental in this patient. It would be nice to see the authors discuss the possibility of Tako-tsubo in this case, and why it would or would not fit the clinical picture. Lastly, considerable English language editing is needed, as well as some streamlining to avoid redundancy. Also, consider modifying the title to: Diagnosis of MINOCA in a young male in the setting of AMI post-ERCP: a case report

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- The same title
- Duplicate publication
- Plagiarism
- No

##### ***BPG Search:***

- The same title
- Duplicate publication
- Plagiarism
- No