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PEER-REVIEW REPORT

Name of journal: World Journal of Critical Care Medicine

Manuscript NO: 52006

Title: Extra-corporeal membrane oxygenation in aortic surgery and dissection: A systematic review

Reviewer's code: 01201852

Position: Peer Reviewer

Academic degree: MD

Professional title: Consultant Cardiac Surgeon

Reviewer's country: United Arab Emirates

Author's country: United Kingdom

Reviewer chosen by: Artificial Intelligence Technique

Reviewer accepted review: 2019-10-16 05:52

Reviewer performed review: 2019-10-16 06:46

Review time: 1 Hour

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 type="checkbox"/> Grade B: Very good	<input checked="" 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 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

A review on an interesting but controversial issue. The manuscript helps in showing some facts on survival, mortality and indications in patients undergoing aortic surgery (mainly for dissection) but lacks in drawing a definite conclusion. However, this paper is an effort to update and review the literature on the role of ECMO in patients with aortic surgery (adults) that may serve a source of information in future. In order to make this manuscript interesting and clear to the readers, I have following suggestions-

1. The introduction should include the fact that there was no pediatric case was included (exclusion criteria).
2. The spectrum of aortic surgery was limited to the dissection/aneurysm/coarctation. What about other surgeries like valve replacement/CABG as combined procedures? A table on this would make it clear. Also, it will be good to have a table segregating type of aortic pathologies and sites (type A,B or thoracic/abdominal, acute, chronic, associated complications?)
3. The indications of ECMO and cannulation techniques (chest/femoral or other approaches for VA ECMO) need to be mentioned briefly.
4. The discussion is unstructured and confusing. In this kind of ambiguous issue, a structured discussion on specific points would be better to understand and generate interest to the readers. For example discussion may be divided in subheadings like complications, effect of associated findings (prognostic or risk factors, LV function, co morbid pathologies, blood chemistry, shock, duration of dissection before surgery, IABP support pre and post op before ECMO, neurological status and complications etc) and also effect of demographic parameters.
5. I doubt "letter to the editor" or other unstructured, anecdotal communication contributes significantly in this study.
6. The indications of ECMO in such patients need to be elaborated or at least discussed in the discussion area in order to be educational to others.
7. Was any bias issue in this metanalysis? How it was excluded.

INITIAL REVIEW OF THE MANUSCRIPT



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