

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 52493

**Title:** Morbidity and Mortality Associated with Atrial Fibrillation in Liver Cirrhosis

**Reviewer's code:** 02546652

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Research Scientist

**Reviewer's Country/Territory:** Italy

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-01-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-01-31 06:55

**Reviewer performed review:** 2020-02-03 12:51

**Review time:** 3 Days and 5 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

The manuscript is interesting and well written (it needs only minor copyediting for few typos). I have two major comments: 1) Authors should better describe the population hospitalized with liver cirrhosis AND atrial fibrillation. The prevalence of AF among liver cirrhosis patients by gender and age group should be presented: how does it compare with estimates for the general US population? 2) Authors should provide some further insight into possible mechanisms of higher mortality in liver cirrhosis patients with AF. They speculate about a role of stroke and AKI. However, they have data at hand to test such hypothesis; for example, they could perform a mediation analysis, or , to keep it simple, they could assess if an increased mortality is found also among liver cirrhosis patients with atrial fibrillation AND WITOUT mention of stroke/ AKI.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 52493

**Title:** Morbidity and Mortality Associated with Atrial Fibrillation in Liver Cirrhosis

**Reviewer's code:** 02634593

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Turkey

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-01-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-01-30 12:21

**Reviewer performed review:** 2020-02-04 11:18

**Review time:** 4 Days and 22 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

In this manuscript, the authors examined morbidity and mortality of patients with concomitant atrial fibrillation (AF) and liver cirrhosis from the National Inpatient Sample (NIS) database. They found that these patients had higher mortality, stroke, and acute kidney injury compared to those who did not have the cardiac arrhythmia. My comments are as follows: 1) This was an interesting and highly scientific study. 2) The major limitation of the study was its retrospective design. This might lead to bias in the reported results. 3) References should be rewritten according to the Journal's style.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Cardiology

**Manuscript NO:** 52493

**Title:** Morbidity and Mortality Associated with Atrial Fibrillation in Liver Cirrhosis

**Reviewer's code:** 03414056

**Position:** Editorial Board

**Academic degree:** FACC, MD, PhD

**Professional title:** Doctor, Reader (Associate Professor), Staff Physician

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-01-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-02-08 19:27

**Reviewer performed review:** 2020-02-16 22:00

**Review time:** 8 Days and 2 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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#### **SPECIFIC COMMENTS TO AUTHORS**

The paper entitled “Morbidity and Mortality Associated with Atrial Fibrillation in Liver Cirrhosis” is a good one, showing that Atrial fibrillation (AFib) is a predictor of increased in-hospital-mortality in patients with liver cirrhosis and is associated with a higher risk of stroke and AKI but interestingly less GI bleeding and need for blood transfusion due to the lower use of anticoagulants in this kind of patients. Besides the limitation of this study as retrospective, in my opinion, this study brings additional knowledge in the field and encourages to make better research in this field. My only concern could be related to knowing the CHADSVASC and HASBLED score of the population and the influence on his prognosis specially for the AFib patients As a peer reviewer, I do not have any further concerns

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Cardiology

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**Reviewer's code:** 02634593

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Turkey

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-01-30

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2020-04-10 06:32

**Reviewer performed review:** 2020-04-10 06:48

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

In my previous review, major corrections were requested. Unfortunately, many of these



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corrections were not completed. These were as follows: 1) There are many similar clinical studies in the medical literature. There is no new or interesting information in the manuscript. 2) There are many writing and grammar errors in the manuscript. These should be corrected by a native English speaker. 3) The major limitation of the study is its retrospective design. These may lead to bias in the reported results. 4) What is CHA2DS2-VASC score of the POAF patients? Is there any correlation between this score and clinical outcomes (i.e., hospital stay, time to surgery, mortality)? 5) More detail should be provided for echocardiographic findings. What are the mean values for ejection fraction, left ventricular dimensions, left ventricular wall thicknesses, atrial dimensions, E/E' ratio and pulmonary artery pressure? Is there any correlation between these parameters and clinical outcomes? 6) References should be rewritten according to the Journal's style. 7) Since they are related to the manuscript, the studies of Bahçivan et al (Anadolu Kardiyol Derg. 2008 Oct;8(5):354-9) and Cho et al (Korean Circ J. 2019 Nov 19. doi: 10.4070/kcj.2019.0219) should be mentioned in the discussion section. Unless these corrections are completed, the manuscript is not suitable for publication.



## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Reviewer's code:** 03414056

**Position:** Editorial Board

**Academic degree:** FACC, MD, PhD

**Professional title:** Doctor, Reader (Associate Professor), Staff Physician

**Reviewer's Country/Territory:** Spain

**Author's Country/Territory:** United States

**Manuscript submission date:** 2020-01-30

**Reviewer chosen by:** Ya-Juan Ma

**Reviewer accepted review:** 2020-04-11 17:19

**Reviewer performed review:** 2020-04-11 17:27

**Review time:** 1 Hour

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The paper entitled "Morbidity and Mortality Associated with Atrial Fibrillation in Liver



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Cirrhosis" is a good one, besides the limitation of this study as retrospective, in my opinion, this study brings additional knowledge in the field and encourages to make better research in this field I see the improvements on the paper after the review process. I am happy that you add data about CHADSVASC, I understand the limitations to calculate the HASBLED, did you try to check other risk of bleeding scores?. As a peer reviewer, I do not have any further concerns