

Reviewer 1: Overall comments: Thank you for opportunity for reviewing this invited editorial “Cardiogenic shock in the setting of acute myocardial infarction: Another area of sex disparity?” I recommend including clinical implications and clinical practice in this review. Totally, I would like to congratulate the authors for the enthusiasm invested in this manuscript. If the above suggestions are incorporated and the paper is thoroughly edited, it will be a strong contribution to the literature.

We thank the reviewer for the constructive feedback. We included a section discussing the clinical implications and clinical practice at the end of the manuscript:

“Clinical implications and clinical practice:

Women, despite having higher comorbidity and varied symptom manifestation, derive similar benefit with guideline-directed management as men. This important message needs to be translated into action and reflected in our clinical practice, where unfortunately women are seen more often to be misdiagnosed and undertreated than men, resulting in worse outcomes. In the real world, there is a need to identify and address individual-based and system-based factors that trigger unconscious biases and impede the provision of high-quality and equitable healthcare irrespective of the sex differences. Since women with AMI have a higher cardiovascular risk profile, dissimilar symptoms and more delayed presentations than men, the clinicians are required to keep a lower threshold for initiating work-up for diagnosis, and institute prompt delivery of care and employ aggressive treatment strategies when indicated.

In the meantime, there is a need to increase awareness among women to identify symptoms, and to seek immediate care. It is essential to emphasize both primary and secondary preventative strategies that are appropriate for women from numerous backgrounds, and could be applicable in various clinical settings. The foremost step towards personalized medicine involves paying attention to sex-specific details and recognizing sex-disparity in the clinical settings, which will help improve awareness, diagnosis, treatment and eventually outcomes in women.”

Scientific Editor:

Issues raised: (1) The “Author Contributions” section is missing. Please provide the author contributions

Thank you for the opportunity to review our manuscript. We provided an “Authors Contributions” section.

(2) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor

We provided a PowerPoint for the Figure.

(3) If an author of a submission is re-using a figure or figures published elsewhere, or that is copyrighted, the author must provide documentation that the previous publisher or copyright

holder has given permission for the figure to be re-published; and correctly indicating the reference source and copyrights.

We confirm that the Figure is original.