



## PEER-REVIEW REPORT

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

**Manuscript NO:** 66259

**Title:** Prognostic Value of Left Atrial Size in Hypertensive African Americans Undergoing Stress Echocardiography

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05088164

**Position:** Associate Editor

**Academic degree:** MD, PhD

**Professional title:** Associate Professor

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

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

**Manuscript submission date:** 2021-03-25

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-04-17 07:51

**Reviewer performed review:** 2021-04-17 21:48

**Review time:** 13 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 Grade E: Do not publish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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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<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's main finding is that the left atrial enlargement is not frequent in African American patients (based on reference values for the general population). Indexed left atrial anterior-posterior diameter is better than left atrial diameter alone in discrimination of the survivors. The title reflects the main subject of the manuscript: prognostic value of left atrial size in hypertension in African Americans undergoing stress echocardiography. The abstract summarizes the work described in the manuscript. The abbreviated word "LA" should be explained at the first use in the abstract. The keywords reflect the manuscript's focus but "left atrial enlargement" and "stress echocardiography" should be added. Better to use African American inside the manuscript. The authors adequately describe the field and the significance of the study. In the Introduction, some editing should be made; the word "risk" is missing in the 9th sentence of the paragraph. The methods were described in adequate detail: clinical characteristics analyzed, echocardiographic measurements, and stress echocardiography. The results are extensively presented, also based on figures and three tables. The authors correctly interpret the results logically and in correlation with the data from the literature of this field. Probably there is a need to improve it by discussing the significance of the results and the relevance to the clinical practice. The paper cites appropriately essential references in this field; unfortunately, just 2 of those 40 are recent (from the last 5 years). The study was reviewed and approved by the local ethical review committee, and the manuscript meets the requirements of ethics. Overall, the manuscript is well written, organized. The language and grammar are accurate. There are few typos to be verified, but not essential changes to be made. The use of abbreviations should be



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