

#### PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 71986

Title: EchoNavigator virtual marker and Agilis NxT steerable introducer facilitate

transseptal transcatheter closure of mitral paravalvular leak

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06187068 Position: Peer Reviewer Academic degree: MD

**Professional title:** Associate consultant

Reviewer's Country/Territory: India

**Author's Country/Territory:** Taiwan

Manuscript submission date: 2021-10-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-10-06 08:07

Reviewer performed review: 2021-10-15 15:44

**Review time:** 9 Days and 7 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ Y] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements

Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

I congratulate the authors on this nice presentation. Para valvular leak closure via transcather approach is a technically demanding procedure. Using a fusion imaging approach definitely reduces the time required. The authors have demonstrated a procedural duration of 120 minutes with fairly matches the contemporary large case series and reports. However, a more detailed focus on the procedure for fusion imaging and additional images would help in better understanding to the readers. Also the fact that live three dimensional TEE imaging (LA side view) during the intervention gives wonderful imaging without the need of additional radiation exposure, this should be taken into consideration.



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Peer-review model: Single blind

Reviewer's code: 02634593 Position: Editorial Board Academic degree: MD

**Professional title:** Professor

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-10-05

**Reviewer chosen by:** Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-12-22 10:43

Reviewer performed review: 2021-12-23 09:42

Review time: 22 Hours

Scientific quality	[ ] Grade A: Excellent [Y] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

### SPECIFIC COMMENTS TO AUTHORS

In this manuscript, the authors reported a case in which transseptal transcatheter closure of mitral paravalvular leak was performed by using the EchoNavigator virtual marker and Agilis NxT steerable introducer. My comments are as follows: 1) There are many writing and grammar errors in the text. These should be corrected by a native English speaker. 2) Other potential uses of the EchoNavigator virtual marker in cardiology practice should be discussed. 3) Pictures in the Figure 1 are too small. Details can not be easily seen. This sohuld be corrected. 4) References should be re-written according to the Journal's style.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04334222 Position: Editorial Board Academic degree: MD

Professional title: Assistant Professor, Doctor, Instructor

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

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-10-05

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-12-22 22:54

Reviewer performed review: 2021-12-28 13:21

**Review time:** 5 Days and 14 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [ Y] No

#### SPECIFIC COMMENTS TO AUTHORS

The Authors described methods in adequate detail in the case report. The new hypotheses that this study proposed regarding the new image virtual marker with Agilis NxT steerable introducer can facilitate transseptal transcatheter closure of mitral paravalvular leak. The aim of this technique is the reduction of the procedure time and contrast media. The key problems in this field that this study has solved are: transseptal transcatheter closure of mitral paravalvular leak was performed efficiently by using the EchoNavigator virtual marker and Agilis NxT steerable introducer. Transcatheter Paravalvular Leak closure is a technically demanding procedure that requires accurate imaging planning and guidance. In case of radiolucent bioprosthesis, the absence of fluoroscopic landmarks represents a major technical challenge for the interventionalist. In this complex scenario, the Authors proposed a multimodality imaging strategy based on computed tomography and echocardiographic-fluoroscopic fusion imaging to achieve a successful transcatheter intervention.



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Peer-review model: Single blind

Reviewer's code: 05428329 Position: Peer Reviewer Academic degree: MD, PhD

Professional title: Associate Professor, Deputy Director, Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Taiwan

Manuscript submission date: 2021-10-05

Reviewer chosen by: Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-12-22 10:38

Reviewer performed review: 2021-12-31 02:33

**Review time:** 8 Days and 15 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection
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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

The author report a case of "EchoNavigator virtual marker with an Agilis NxT steerable introducer facilitates transseptal transcatheter closure of mitral paravalvular leak". 1.It's better to add some details about Agilis NxT steerable introducer, and add some data about the comparison between surgery and transcatheter closure, transseptal and transapical. Combine this case you can discuss why you choose transseptal approaching, what kind of PVLs fit this approaching. 2. You need to provide more clear image to illustrate the procedure



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Peer-review model: Single blind

**Reviewer's code:** 05584829 **Position:** Editorial Board

Academic degree: MBBS, MD, MS

Professional title: Academic Fellow, Research Fellow

Reviewer's Country/Territory: United States

**Author's Country/Territory:** Taiwan

Manuscript submission date: 2021-10-05

**Reviewer chosen by:** Xin Liu (Online Science Editor)

Reviewer accepted review: 2021-12-27 00:47

Reviewer performed review: 2022-01-05 00:14

**Review time:** 8 Days and 23 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ ] Grade A: Priority publishing [ Y] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
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Re-review	[ ]Yes [Y]No



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Peer-reviewer

Peer-Review: [ ] Anonymous [Y] Onymous

statements Con

Conflicts-of-Interest: [ ] Yes [Y] No

#### SPECIFIC COMMENTS TO AUTHORS

minor revision