

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Hepatology*

**Manuscript NO:** 73079

**Title:** The Impact of Liver Cirrhosis on ST-Elevation Myocardial Infarction Related Shock and Interventional Management, a Nationwide Analysis

**Provenance and peer review:** Unsolicited manuscript; externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05419146

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2021-11-08

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-24 06:45

**Reviewer performed review:** 2021-11-24 07:09

**Review time:** 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



**Baishideng  
Publishing  
Group**

7041 Koll Center Parkway, Suite  
160, Pleasanton, CA 94566, USA  
**Telephone:** +1-925-399-1568  
**E-mail:** bpgoffice@wjgnet.com  
<https://www.wjgnet.com>

<b>Peer-reviewer statements</b>	Peer-Review: [ <b>Y</b> ] Anonymous [ ] Onymous Conflicts-of-Interest: [ ] Yes [ <b>Y</b> ] No
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#### **SPECIFIC COMMENTS TO AUTHORS**

Based on a large pool of patient numbers, the manuscript analyzed the factors that affect the length of stay and hospital charges in cirrhotic patients who present with ST-elevation myocardial infarction-related cardiogenic shock (SRCS), and found that LC was associated with significantly increased inpatient mortality, length of stay, and total hospital charges in patients who develop SRCS. Overall, this was a fascinating, rigorous, and solid investigation; the conclusion was convincing and informative.

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**Reviewer's code:** 05190007

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Doctor, Professor

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

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

**Manuscript submission date:** 2021-11-08

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-09 06:23

**Reviewer performed review:** 2021-11-29 02:08

**Review time:** 19 Days and 19 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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### **SPECIFIC COMMENTS TO AUTHORS**

Dar and colleagues aimed to identify the factors that increase inpatient mortality, length of stay, and total hospital charges in patients with liver cirrhosis compared to those without liver cirrhosis. The topic is critical in the field. The title reflects the main subject of the manuscript. The abstract reflects the work described in the manuscript. The manuscript appropriately cites the latest and essential references. The presented figures are clear. Language is good. However, some points should be considered. Comments: - Abstract: Some abbreviations were presented without being spelled out. Would you please spell out firstly any abbreviation? - Abbreviations: any used abbreviation should be spelled out firstly. Then no need to mention the spelling out and its abbreviation again after the first time. Example; page 6: PCI and ECMO have mentioned again in their spelled-out form. - Page 6: what are the definitions of mild liver disease and moderate-severe liver disease? - Statistics: Were all continuous variables homogenous to use the student t-test? Why was a cutoff P value of 0.2 used? Including variables that were predictors of the outcome depending on previous studies is a bias. - Discussion is too long, please summarize