

## PEER-REVIEW REPORT

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

**Manuscript NO:** 74436

**Title:** Is there a window of opportunity to optimize trastuzumab cardiac monitoring?

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

**Peer-review model:** Single blind

**Reviewer's code:** 05338743

**Position:** Peer Reviewer

**Academic degree:** Doctor, PhD

**Professional title:** Doctor, Professor

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

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

**Manuscript submission date:** 2021-12-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-25 08:14

**Reviewer performed review:** 2022-01-26 08:25

**Review time:** 1 Day

<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 Grade E: Do not publish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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

statements

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

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

This manuscript aims to provide more effective strategy to monitor the trastuzumab-related cardiotoxicity. Echocardiogram data was collected to access the LVEF at indicated time after trastuzumab application. Monitoring the cardiac function timely is benefit to guide the use of trastuzumab. So, study like this is necessary. Major concerns: 1. LVEF detected by echocardiogram is a lagging indicator compared with myocardial enzymes such as cTnI, cTnT. It is incomplete to access trastuzumab-related cardiotoxicity based on only LVEF. 2. Manuscript described 40 patients have cardiotoxicity according to LVEF, and 29 patients recover after adjusting the therapy strategy. Whether the 29 patients continued to receive trastuzumab treatment after LVEF recover, and their prognosis? 3. Table 1 in the manuscript is non-standard. 4. Statistical results (p value) should be presented in the text and figures. 5. References in the manuscript should be inserted according to the journal policy.

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**Reviewer's code:** 05227810

**Position:** Editorial Board

**Academic degree:** FACC, FESC, MBBS, MD

**Professional title:** Additional Professor

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

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

**Manuscript submission date:** 2021-12-23

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-01-24 13:13

**Reviewer performed review:** 2022-02-04 10:49

**Review time:** 10 Days and 21 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 type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous

**statements**

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

**SPECIFIC COMMENTS TO AUTHORS**

The authors present a retrospective analysis of trastuzumab related cardiotoxicity. They highlight the high incidence of asymptomatic LV dysfunction at around 290 days. However, few points are worth mentioning- 1)The introduction fails to mention the incidence of trasutuzumab induced cardiotoxicity. It just says -"the incidence of cardiotoxicity is rare" which does not suffice. Recent articles peg the incidence of LV dysfunction at 25% and heart failure between 1-4%.(Yu AF et al .JAMA Cardiol. 2020;5(3):309-317) 2)Role of Neureglin-ERBB axis in pathogenesis of trastuzumab induced cardiomyopathy need to be included in discussion.(Cote et al. ERBB2 inhibition and heart failure. N Engl J Med 2012;367:2150-3.) 3) Need to discuss the risk factors for trastuzumab induced cardiomyopathy in detail.(Onitilo et al.Ther Adv Drug Saf 2014;5:154-66.) 4) The definition of cardiotoxicity- "Cardiotoxicity was defined as: 10% drop in LVEF from the baseline echo, a drop below 50% or symptoms according to the New York Heart Association (NYHA) class III or IV." seems outdated.[ref.9- from 1994] we need to update it. 5) Please also provide Echocardiographic criteria for delaying/withholding trasutzumab therapy based on echocardiography.(<https://www.acc.org/latest-in-cardiology/articles/2016/06/06/09/32/cardiotoxicity>) 6) The title doesn't do justice to the study performed and hence to be changed. It looks like an open ended question suiting an editorial not an original research.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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**Peer-review model:** Single blind

**Reviewer's code:** 05338743

**Position:** Peer Reviewer

**Academic degree:** Doctor, PhD

**Professional title:** Doctor, Professor

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

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

**Manuscript submission date:** 2021-12-23

**Reviewer chosen by:** Yun-Xiaojuan Wu

**Reviewer accepted review:** 2022-04-12 09:02

**Reviewer performed review:** 2022-04-12 09:06

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<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**

All my issues have been addressed.