

Response to Reviewers

Reviewer 1

Comment 1. The indications and contraindications of IVL should be further detailed in the manuscript.

Our response – We thank the reviewer for their kind comments. We have added a new section of "Indications of S-IVL" in the new manuscript.

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Comment 2. The fundamental principles and potential mechanisms of IVL also require more explanation. This article can be referred: Kereiakes DJ, Virmani R, Hokama JY, et al. Principles of Intravascular Lithotripsy for Calcific Plaque Modification. JACC Cardiovasc Interv. 2021;14(12):1275-1292. doi:10.1016/j.jcin.2021.03.036.

Our response – We thank the reviewer for their kind comments. We have added a separate section in the revised manuscript entitled "Mechanism of IVL" and have incorporated the suggested article as a new reference no.10.

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Comment 3. Compared with the existing technology, such as rotablation, orbital atherectomy, and excimer laser, the advantage of IVL should be further elaborated.

Our response – We thank the reviewer for their kind comments. We

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[have incorporated a new section entitled-"S-IVL vis-a vis Contemporary Calcium therapies" in the revised manuscript.](#)

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Comment 4. References NO.1 to NO.8 should be changed into more innovative and influential literatures. Reference NO.11 should be checked again.

Our response – We thank the reviewer for their kind comments. [We have changed references 1 & 8. We have also corrected the reference no.11 and added a few more.](#)

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Comment 5. It would be more clearly if the authors could label a, b, c, and d in the figures. And please check whether Figure 4 cited in Case 1 is correct or not.

Our response – We thank the reviewer for their kind comments. We apologize for the error and wish to inform that we have relabeled all pictures with a,b,c,d wherever feasible. [We have also renumbered the figures in revised manuscript as Figure 4 was incorrectly cited.](#)

Reviewer 2

Comment 1- This article reviews the application of Shockwave

intravascular lithotripsy in coronary artery calcification and lists two clinical examples. It provides a new method for cardiologists and has strong clinical application value.

Our response – We thank the reviewer for their kind comments.

Their favorable comments are welcome and justify the hard work poured into the making of the manuscript.