

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 77676

Title: Extensive right coronary artery thrombosis in a patient with coronavirus disease 2019: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 04159375

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Attending Doctor, Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Brazil

Manuscript submission date: 2022-05-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-19 03:53

Reviewer performed review: 2022-05-24 06:13

Review time: 5 Days and 2 Hours

Scientific quality	<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 Grade E: Do not publish
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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Peer-reviewer statements	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

The authors reported a case of AMI in a patient with COVIT-19 infection. The authored weighed the significance of this case on the uses of IVUS and OCT findings before and after the treatment respectively. This reviewer has several concerns about this case report. Major: 1. Please discuss about whether there is any specific findings that confirm the relationship COVIT-19 infection and AMI and the difference between this case and previous literatures. AMI without plaque rupture (type 2) may occur besides the COVIT-19 infection. There are similar case reports of AMI in patients with COVIT-19. Please discuss about large thrombus burden in COVIT-19 cases. I think the following cases can be referred. a. Pandit B N, et al. Impact of COVID-19 on Thrombus Burden and Outcome in Acute Myocardial Infarction. Cureus 13(8): e16817. DOI 10.7759/cureus.16817 (August 01, 2021) b. Trivi M et al. MEDICINA (Buenos Aires) 2020; Vol. 80 (Supl. VI): 97-99 2. More detailed clinical findings of COVIT-19 such as disease severity, other organ involvement, and systemic thrombogenicity during the entire course of COVIT-19. 3. Regarding subacute and acute thrombus formation, please add the references that reveals the echocardiographic and clinical findings between acute and subacute thrombus. What do two stage thrombus formation mean in this case? 4. I don't think OCT was necessary to confirm the disappearance of thrombi. OCT is invasive and much cost compared with angiogram alone. Was there any possibility of treatment option by using OCT? Minor: Please show the full spelling for COVIT-19 and SARS CoV-2 at the first presentation. Page 1 short title I don't think authors name is necessary in the short title. Page 3 line 11 Please add branches after RPD and RPV Page 3 line 17 RVP branc. →RVP branch Page 4 core tip second line



**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>

duplicated “we” third line STEMI please show the full spelling at the first presentation. 5th line don’t show the full spelling for RPR. 8th line ACS Page 5 line APRESENTATION→PRESENTATION Page 5 tiboline Please show the dose and company Page 5 Please show the date of 3rd vaccination. When the patient vaccinated? Before or after infection? Page Doppler echocardiography showed regional akinesis? Page 7 final diagnosis The authors doesn’t show the data showing Kilipp grade 1. Page 7 treatment Please show the dose of enoxaparin What the authors mean specifically by “complete” anticoagulation? Discussion Line 1-5 please add the reference about this context Figure 3 in the legend capitals should be used.(a, b) (c, d) Please indicate diastolic/systolic in the figures C and D Figure 4 in the legend capitals should be used. Figure 6 in the legend capitals should be used. In all figures indicate the views the pictures were taken I don’t think Figure 7 is necessary.

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 77676

Title: Extensive right coronary artery thrombosis in a patient with coronavirus disease 2019: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03846820

Position: Editorial Board

Academic degree: FACC, FESC, MD

Professional title: Academic Research, Assistant Professor, Doctor

Reviewer's Country/Territory: Netherlands

Author's Country/Territory: Brazil

Manuscript submission date: 2022-05-12

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-06-09 03:32

Reviewer performed review: 2022-06-09 05:41

Review time: 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Peer-reviewer
statements**Peer-Review: [☐] Anonymous [☒] Onymous
Conflicts-of-Interest: [☐] Yes [☒] No**SPECIFIC COMMENTS TO AUTHORS**

Dear author, The article represents the clinical case with a focus on extensive right coronary artery thrombosis in a COVID-19 patient. The article is written with the acceptable English-speaking adduction of the arguments. The article is sufficiently novel and very interesting to warrant publication. All the key elements are presented and described clearly. The most discussable options in the article are: 1) Please correct all your multiple grammar errors and typos. 2) This is technically a case of the complication or adverse effect after vaccination. Or how many days later he has developed a complication? Why you would not you emphasize on that? Frankly, the case is confusing in case of timing. When all vaccine doses were applied exactly? Please, draw a timeframe. 3) Please mention what kind of the imaging analysis is that? How many experts were involved? Did you use any imaging software? 4) Regarding treatment it must be clear how is that correspondent to the international Guidelines. 5) The quality of figures is extremely low. I cannot evaluate it properly. Please provide the reader with the higher quality images. 6) Did you find a source of the thrombosis? I mean signs of plaque erosion or rupture? Regarding your thereafter angio, do you see any culprit lesions? Figure 6: your OCT examination does not make any sense if you do not show the exact location of the lesion and possible source of the thrombosis.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 77676

Title: Extensive right coronary artery thrombosis in a patient with coronavirus disease 2019: A case report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03846820

Position: Editorial Board

Academic degree: FACC, FESC, MD

Professional title: Academic Research, Assistant Professor, Doctor

Reviewer's Country/Territory: Netherlands

Author's Country/Territory: Brazil

Manuscript submission date: 2022-05-12

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2022-07-29 14:04

Reviewer performed review: 2022-07-29 14:28

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" 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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous



**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>

statements

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

SPECIFIC COMMENTS TO AUTHORS

Dear authors, Thank you very much for your substantial efforts to improve the article. I have a few major suggestions though: 1. Why did you not consider a case of embolism, I mean thromboembolism, in your case? The coincidence of the long-term hormone therapy and accidental thrombosis in coronaries is simply weird. Do you have a D-dimer or CT data? If not, please provide a reader with your vision of such a scenario! 2. I am personally disappointed by your corrections. Your remarks for peers are good but they were not accurately reflected in the article. Your comments must be entirely mentioned in the article. Please optimize the content.