

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 83845

Title: Current knowledge and contemporary management of non-A non-B aortic dissections

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 00227375

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Japan

Author's Country/Territory: Greece

Manuscript submission date: 2023-02-11

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-03-07 10:36

Reviewer performed review: 2023-03-08 05:16

Review time: 18 Hours

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of	[] Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair
this manuscript	[] Grade D: No creativity or innovation





Scientific significance of the conclusion in this manuscript	 [] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [] 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	[]Yes [Y]No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This is an interesting review about the non-A non-B aortic dissection. This manuscript is nicely structured and well written. I have no question about this manuscript.



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Reviewer's code: 03755399

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Consultant Cardiac Surgeon

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: Greece

Manuscript submission date: 2023-02-11

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-03-21 08:39

Reviewer performed review: 2023-03-24 14:30

Review time: 3 Days and 5 Hours

	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C:
Scientific quality	Good
	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [] Grade B: Good [<mark>Y</mark>] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	 Grade A: Excellent [] Grade B: Good [Y] Grade C: Fair Grade D: No creativity or innovation
this manuscript	[] Grade D. No creativity of innovation



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Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors performed a mini-review of the literature, aiming to elucidate the epidemiology, clinical course and the optimal treatment modality. However, as similar review article has been already published (Howard C, et al. Non-A non-B aortic dissection: A literature review. J Card Surg. 2021 May;36(5):1806-1813.), the authors need to clarify what is the novelty of this mini-review on the same topic. I have several comments that limit the scientific value of the manuscript. M comments: 1. Please use AAD instead of AD 2. Pls re-phrase "to coin the term" 3. Pls correct "an entry, intimal, tear" - too many commas 4. Pls be more precise and add incidence from the previous reports. Remove "a maximum of 11% ". Also, pls add similar review article on the same topic in your references (Howard C, et al. Non-A non-B aortic dissection: A literature review. J Card Surg. 2021 May;36(5):1806-1813.). The authors nicely reported incidence in the table 1. 5. What is the novelty of this mini-review in comparison with previously published similar review article as above? 6. Pls remove completely "pathophysiology" paragraph as it is already described in the above review article and duplicate study needs to be avoided for ethical reasons. Pls describe subtle dissection entity under



"Clinical Presentation" (Sef D, et al. Subtle aortic dissection in a patient with severe aortic regurgitation and undiagnosed bicuspid aortic valve: A case report with a literature review. J Card Surg. 2021 Sep;36(9):3417-3420.) 7. Pls correct to "the authors highlighted" 8. Pls remove "they are "unable" to address dissections regarding aortic arch involvement" and correct to "they lack clarity regarding..." 9. Pls re-phrase "is in order " as it is most common treatment modality but not the only one. 10. Pls remove "can be easily assessed and addressed in time" 11. "Valentine et al." - missing reference at the end of the sentence 12. Missing references after The FET technique description 13. Pls abbreviate "spinal cord injury" as SCI 14. Pls correct "shrinkaged" 15. The authors lack discussion about the treatment of non A non B AAAD in regards to the most recent studies and this section needs to be improved. Pls refer to the most recent studies such as: a. Spanos K, et al. Management of Ascending Aorta and Aortic Arch: Similarities and Differences Among Cardiovascular Guidelines. J Endovasc Ther. 2022 Oct;29(5):667-677. b. Tian C, et al. Surgical treatment patterns and clinical outcomes of type B aortic dissection involving the aortic arch. J Vasc Surg. 2023 Apr;77(4):1016-1027.e9. c. Kosiorowska M, et al. Non-A non-B acute aortic dissection with entry tear in the aortic arch. Interact Cardiovasc Thorac Surg. 2022 May 2;34(5):878-884.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 03755399

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Consultant Cardiac Surgeon

Reviewer's Country/Territory: United Kingdom

Author's Country/Territory: Greece

Manuscript submission date: 2023-02-11

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2023-04-11 09:41

Reviewer performed review: 2023-04-20 03:54

Review time: 8 Days and 18 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
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

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

SPECIFIC COMMENTS TO AUTHORS

The authors should be congratulated for improving their mini-review of the literature on non-A non-B aortic dissection. However, they did not address some of the important questions/comments and they have even skipped the most important question so I will repeat - What is the novelty of this mini-review in comparison with previously published similar review article (Howard C, et al. Non-A non-B aortic dissection: A literature review. J Card Surg. 2021 May;36(5):1806-1813.)? I still have several comments that limit the scientific value of the manuscript: 1. I strongly recommend to add similar review article on the same topic to your references (Howard C, et al. Non-A non-B aortic dissection: A literature review. J Card Surg. 2021 May;36(5):1806-1813.) since the topic is very similar and it is important to acknowledge the recent work done by other authors. 2. Pls re-phrase the subtitle to "Treatment modalities" 3. Pls re-phrase "to any kind of surgery" 4. Pls add the most recent and important AHA guidelines to your discussion (doi: 10.1161/CIR.000000000001106. Epub 2022 Nov 2.) 5. I would suggest mentioning important diagnostic pathways after the section "Clinical Presentation" (PMID: 32503754 DOI: 10.1016/j.hfc.2020.03.002) and discussing the value of preoperative CT that is being increasingly used in our routine practice and can detect incidental findings in aortic patients such as non-A non-B aortic dissection (PMID: 32865197 DOI: 10.1093/icvts/ivaa160). This should improve the important discussion about diagnostic approach missing in your review article.

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