

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 84421

Title: Drug-coated balloons for treating de novo lesions in large coronary vessels: A case

report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05137158

Position: Peer Reviewer

Academic degree: N/A

Professional title: N/A

Reviewer's Country/Territory: Slovenia

Author's Country/Territory: China

Manuscript submission date: 2023-03-23

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-23 05:58

Reviewer performed review: 2023-04-28 09:05

Review time: 5 Days and 3 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good
- 1	[] Grade D: Fair [] Grade E: Do not publish
Novelty of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] Grade D: No novelty
Creativity or innovation of this manuscript	[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair [] 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	[] 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
Re-review	[Y] Yes [] No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The manuscript, "Drug-coated balloons treat De Novo lesions in large coronary vessels: a case report", is well written and a very interesting case report on endovascular treatment (EVT) of De Novo lesions in large coronary vessels. However, in order to provide more incremental value to the existing literature base, please consider the following revisions. I appreciate that these revisions will take some time and effort on your part, but I am confident that they will improve the quality and impact of your submission. A few comments Background: There is strong evidence that DCBs are effective in peripheral interventions. Can you apply this evidence to coronary artery interventions? Case presentation: Was heparin given during the procedure? The inflation time and pressure of the DCB - was it according to recommendations? Was the follow-up only on December 19, 2021, or were there some additional follow-ups? If so, was CTA performed, and how were the results? Discussion: Can you specify the advantages of pre-dilatation in more detail?



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Peer-review model: Single blind

Reviewer's code: 04433149
Position: Peer Reviewer
Academic degree: N/A
Professional title: N/A

Reviewer's Country/Territory: Egypt

Author's Country/Territory: China

Manuscript submission date: 2023-03-23

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-09 09:02

Reviewer performed review: 2023-04-28 12:58

Review time: 19 Days and 3 Hours

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



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Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
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SPECIFIC COMMENTS TO AUTHORS

The idea itself is nice however, there is NO justification for this case to have a drug coated balloon alone without a stent. This should be justified before considering acceptance of the case. Very interesting case indeed. However, in a near total occlusion of the LAD I do not think a lot of physicians would agree on not stenting the artery specially that the PTCA wire did not pass and you had to dilate multiple times to open it up. What was the justification of just drug coated balloon without any stents? How did you make sure that there were no residual dissections after the PTCA as you dilated with a 2.0 balloon and 3.5 cutting balloon in addition to the drug coated balloon? Was it IVUS guided? The ostium of the large diagonal branch seems healthy and this is a provisional stent bifurcation technique.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 04433149

Position: Peer Reviewer

Academic degree: N/A

Professional title: N/A

Reviewer's Country/Territory: Egypt

Author's Country/Territory: China

Manuscript submission date: 2023-03-23

Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2023-05-11 08:13

Reviewer performed review: 2023-05-11 21:37

Review time: 13 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] 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 language, grammar and medical terms should be thoroughly revised eg; drug-coated balloons were chosen instead of stents was that the patient did not develop coronary coarctation after pre-dilatation