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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 85046

Title: Image-based Visualization of Stents in Mechanical Thrombectomy for Acute

Ischemic Stroke: Preliminary Findings from a Series of Cases

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05291028 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer's Country/Territory: Spain

Author's Country/Territory: China

Manuscript submission date: 2023-04-10

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-26 05:39

Reviewer performed review: 2023-04-26 10:50

Review time: 5 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish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



Baishideng

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[] Grade A: Excellent [Y] Grade B: Good [] Grade C: Fair
[] Grade D: No scientific significance
[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
[Y] Yes [] No
Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors reported a retrospective clinical study of four patients with acute ischemic stroke undergoing stent-based mechanical thrombectomy. The authors demonstrated the utility and substantial potential of Solitaire AB retrievable stent imaging in stent-based mechanical thrombectomy for acute ischemic stroke, as the stent was visible on the image when the thrombus was captured, thus improving the success rate of stent mechanical thrombectomy. The study is potentially interesting, but can be improved if the following considerations are addressed: 1 It would be helpful to mention that cardioembolic stroke and atherothrombotic stroke are in the Introduction subtypes of ischemic infarct with the highest in-hospital mortality. The short-term prognosis of patients with cardioembolic stroke and atherothrombotic stroke is poor compared with other ischemic stroke subtypes (see and add this reference: Eur J Neurol 2 1999; 6: 677-683). Neurological examination and cerebrovascular risk factors should be included in the description of patient 1 The result of the brain CT scan should be included in the description of patient 3 Please correct "right positive Babinski sign" to "right Babinski sign" in Patient 4 5 It



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should be noted in the Discussion, that patients 2 and 4 presented with malignant middle cerebral artery infarction, a devastating type of ischemic stroke. In a recent clinical series, decreased consciousness, nausea or vomiting, and heavy smoking were the main associated clinical factors (REV INVEST CLIN. 2015;67:64-70). We recommend including and commenting on this reference.

6 It would be interesting if the authors included in the text some of the limitations of this study.



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Peer-review model: Single blind

Reviewer's code: 05130664 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2023-04-10

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-05-05 09:56

Reviewer performed review: 2023-05-05 09:59

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] 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



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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) [] Minor revision [Y] 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

Dear Authors this is very important method for treatment of ischemic ictus, but can you describe the essential criteria for enrollment of this procedure? this procedure is possible in all patients with ischemic ictus?



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RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Clinical Cases

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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05130664 Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2023-04-10

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2023-05-18 09:50

Reviewer performed review: 2023-05-18 11:13

Review time: 1 Hour

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



Baishideng **Publishing**

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statements

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

SPECIFIC COMMENTS TO AUTHORS

Dear Authors, this paper is very important, but it has different limitations. In particular, you descirbe the management of acute ischemic stroke in patients who underwent stent-based mechanical thrombectomy. Please can you describe the clinical requirements for thrombectomy, such as age, comorbidity, confusional state, gender etc? Thank you