

Reviewer #1:

Scientific Quality: Grade A (Excellent)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: The manuscript is very well structured, written and has a lot of applicable results with follow up of pacing which was not performed in all of the previous studies. A very well written manuscript with excellent analysis. Did you analyze the different upgrades in the valves? Since you started in 2012 and finished collecting patients in 2019, and there has been since a great innovation in the types of valves.

Response:

Thanks for the feedback. We did not analyze the specific generational upgrades of the different valves since throughout the study we used only two distinct type of valves (self-expandable and balloon expandable) each of which has a peculiar mechanism of deployment. It was the pace make incidence risk of each valve type (self-expandable vs balloon expandable) that we evaluated rather than a specific vale generation.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: Specifically mentioning the trade names of valves creates some bias ,especially without mentioning the basic difference Specifically pertaining to choice of valves of either company Authors may be asked to brief regarding this one. I congratulate the authors for their efforts in bringing this manuscript

Response:

Thanks for the positive feedback and question.

There were only two distinct TAVR valve type with peculiar deployment mechanism used in the study (self-expandable and balloon expandable) from widely recognized manufacturers (Medtronic and Edwards respectively). We do not believe this constituted a bias as it makes the readers recognize the specific valve type being evaluated and also made it possible to compare our outcomes with other studies. Other similar TAVR valve studies also adopted this valve identification approach. We mentioned in the study limitation that since this was a retrospective study, the decision of which valve to implant was determined by the multidisciplinary valve team and was not randomized.