



PEER-REVIEW REPORT

Name of journal: *World Journal of Cardiology*

Manuscript NO: 86273

Title: Immediate In-hospital Outcomes after Percutaneous Revascularization of Acute Myocardial Infarction Complicated by Cardiogenic Shock

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05566451

Position: Editorial Board

Academic degree: PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Pakistan

Manuscript submission date: 2023-06-09

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-06-18 10:33

Reviewer performed review: 2023-06-22 04:20

Review time: 3 Days and 17 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 type="checkbox"/> Major revision <input checked="" 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 organization of this article is not clear enough, I hope there will be a deeper discussion.



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Reviewer's code: 03656608

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Pakistan

Manuscript submission date: 2023-06-09

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-01 11:23

Reviewer performed review: 2023-07-02 03:24

Review time: 16 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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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

Bashir et al., investigated the mortality of patients with acute myocardial infarction complicated by cardiogenic shock after primary PCI, and identified the risk factors for in-hospital death based on a retrospective study. There are many major issues to be addressed. Major revision

Title: 1. "Acute MI" should be revised to AMI or use its full name. 2. "Cardiogenic Shock Complicating Acute MI" is wrong, it should be revised to "AMI Complicated by Cardiogenic Shock", please double-check throughout the manuscript. Abstract: In the methods section, please add the setting where the study was conducted. Keywords: Why did you choose "premature", "STE-ACS", "MACE", and "South Asia" as the keywords in the manuscript? It is really confusing because these keywords never appear in the main text of the manuscript. Introduction:

1. Please add the epidemiology of AMI, and AMI complicated by cardiogenic shock. 2. Please use the full name of cardiogenic shock in the first instance of its appearance and consistently use the abbreviation throughout the rest of the manuscript. This also applies to "CABG" and "IABP", please revise and double-check throughout the manuscript. 3. There are some punctuation errors, for example, "Patients with



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cardiogenic shock are at risk of developing several in-hospital complications, some of which include; acute kidney injury (AKI): a decreased cardiac output and low blood pressure can lead to reduced kidney perfusion and subsequent AKI [6]. Arrhythmias: patients with cardiogenic shock are at increased risk of developing arrhythmias such as atrial fibrillation and ventricular tachycardia [7]. Pulmonary edema: excessive fluid administration or impaired cardiac function can lead to pulmonary edema, a potentially life-threatening condition [8]. Multiorgan failure: prolonged hypotension and decreased cardiac output can lead to impaired perfusion to vital organs, resulting in multiorgan failure [8]. Bleeding complications: invasive procedures such as PCI can increase the risk of bleeding complications [9]. Infections: patients with cardiogenic shock are at increased risk of developing infections, including catheter-related bloodstream infections and ventilator-associated pneumonia [10]. Thromboembolic events: patients with reduced cardiac output and immobility are at increased risk of developing deep vein thrombosis and pulmonary embolism [8].” Please revise and double-check throughout the manuscript. 4. The citation format in the sentence “Thirdly, the use of inotropes and vasopressors should be carefully titrated to avoid complications such as arrhythmias and excessive vasoconstriction. [12]”, is wrong. Please revise and double-check throughout the manuscript. Material and Methods: 1. A typo in the sentence “This retrospective analysis was conducted at the largest tertiary care cardiac hospital in Karachi, Pakistan, after approval form the institutional ethical review board.” 2. Please add the ethics number of the study. 3. A punctuation error in the sentence “Data regarding hospital course of the patients was also extracted which included; need of intra-aortic balloon pump (IABP), intubation, temporary pacemaker, inotropic support, and in-hospital complications such as sepsis, renal dysfunction, cardiac arrest, cerebrovascular accident, hypoxic brain injury, and multi-organ dysfunction.” Results: 1. When you report the results, the decimal point retention number should be unified.



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2. Please do not use “be associated with” in describing the baseline clinical characteristics. 3. What is “table mortalities”? It is confusing. 4. In the sentence “Among other causes, renal failure observed in 25.1% (42/167), multi-organ dysfunction in 19.8% (33/167), sepsis in 18% (30/167), hypoxic brain injury in 6.6% (11/167), and cerebrovascular accident in one (0.6%) patient.”, the “(0.6%)” should be revised to “0.6% (?/?)”. Please revise and double-check throughout the manuscript. 5. In univariable logistic regression analysis, the P-value of “side branch” is 0.090, why did you still include “side branch” in the multivariable logistical regression analysis? Please give the selective criteria of the variables in the multivariable logistical regression analysis. 6.

Please use a standard three-wire table to present the results. Discussion: 1. In the sentence “Cardiogenic shock (CS) is a severe form of AMI”, CS is a complication of AMI, so “form” cannot be used. 2. Please add the full name of “TIMI” and “IMPELLA”.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Reviewer's code: 03656608

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: Pakistan

Manuscript submission date: 2023-06-09

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2023-08-01 03:50

Reviewer performed review: 2023-08-01 06:38

Review time: 2 Hours

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



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

SPECIFIC COMMENTS TO AUTHORS

1. When you revise the manuscript, please highlight the area your revised, it's really difficult to track the place you revised in main text of the manuscript. 2. You did not give any response to the comment "Please add the epidemiology of AMI, and AMI complicated by cardiogenic shock". 3. P-value <0.05 or <0.1 is more common. Is there has any reference to support "All the variables with p-value <0.20 in the univariate analysis were included in the multivariable analysis." ?



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Manuscript submission date: 2023-06-09

Reviewer chosen by: Jia-Ru Fan

Reviewer accepted review: 2023-08-01 04:26

Reviewer performed review: 2023-08-01 15:22

Review time: 10 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
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The author had made the necessary changes to the article and may consider publishing it in this journal.