

Dear Editor,

Thank you for carefully reviewing our manuscript previously titled “Individualized anti-thrombotic therapy for acute myocardial infarction complicated with left ventricular thrombus: A case report” for possible publication in the *World Journal of Clinical Cases*. We are grateful to you and your reviewers for their constructive critique. We have revised the manuscript, highlighting our revisions in yellow, and have attached point-by-point responses detailing how we have revised the manuscript in response to the reviewers' comments below.

Thank you for your consideration and further review of our manuscript. Please do not hesitate to contact us with any further questions or recommendations.

Yours Sincerely,

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Reviewer Comments:

1 Title. Does the title reflect the main subject/hypothesis of the manuscript?

Response: Thank you for your question. It does reflect the main hypothesis of the manuscript.

2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? The following sentence is too long: "Currently, there is no standard anti-thrombotic therapy for patients with acute myocardial infarction (AMI) complicated with left ventricular thrombosis (LVT), While vitamin K antagonist is the preferred oral anticoagulant, how to define the course of anticoagulant drugs remains challenging." Please revise punctuation. The words "While" should not be capitalized after a comma. The authors have provided a certificate indicating that this manuscript underwent English revision. Nevertheless, I highly recommend that it undergo a review by someone with a medical background. Please see below a small suggestion. "Currently, there is no established standard anti-thrombotic therapy for patients experiencing acute myocardial infarction (AMI) complicated by left ventricular thrombosis (LVT). While vitamin K antagonists are the preferred choice for oral anticoagulation, determining the optimal course of anticoagulant medication remains a challenge. This study makes a significant contribution to the medical community. However, the presentation of the observations, as depicted in the manuscript, may not be optimal.

Response: Thank you for your constructive advice. Following your advice, we have found a professional with a medical background to review the paper. And the content of this paper has been revised according to your advice.

3 Key Words. Do the key words reflect the focus of the manuscript?

Response: Thank you for your constructive question. The key words do reflect the focus of the manuscript.

4 Background. Does the manuscript adequately describe the background, present status and significance of the study?

Response: Thank you for your constructive question. The manuscript does adequately describe the background, present status and significance of the study.

5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? In the section " Chief complaint: A 52-year-old male was admitted to the hospital on December 7, 2019, mainly due to "chest pain for more than one month, which worsened for two hours". Do you mean the following: "Chief Complaint: A 52-year-old male was admitted to the hospital on December 7, 2019, primarily presenting with "chest pain persisting for over one month, with a recent exacerbation lasting two hours." In the section "On November 25, the case

was discharged from the hospital and diagnosed as AMI. Based on the patient's compliance, the enoxaparin injection was replaced with dabigatran etexilate capsule 110 mg bid, and the other discharge drugs remained the same as before. The patient's medication compliance was 100% at one week after discharge. The patient felt chest pain two hours before was located in the precordial area, without sweating or discernible severity. Thus, he visited our hospital for further treatment." Do the authors mean the following: " On November 25, the patient was discharged from the hospital after being diagnosed with AMI. Based on the patient's adherence to the prescribed treatment plan, enoxaparin injections were switched to dabigatran etexilate capsules (110 mg twice daily), while the other discharge medications remained unchanged. The patient's compliance with medication was at 100% one week after discharge. The patient experienced chest pain two hours before visiting our hospital, which was localized to the precordial area and not accompanied by sweating or apparent severity. Consequently, he sought further medical treatment at our hospital". The patient sought further medical treatment a week after discharged, is that understanding correct? In the section: "Personal and Family History: Personal history and family history had not unique...., No genetic history in the family". Do the authors mean the following: "Personal and Family History: The personal history and family history did not reveal any distinctive features. There was no significant genetic history within the family". In the section: "Imaging examinations

Cardiac ultrasound showed coronary artery stent implantation, normal diameters of all heart chambers, segmental dyskinesis of the left ventricular wall, slightly decreased left ventricular function, LVEF of 0.49, and a band-shaped slightly higher echo of about 45.3×42.7×17.4 mm in the apex of the left ventricle. Admission diagnosis was as follows: (1) AMI; (2) coronary atherosclerotic heart disease; (3) post-coronary stent implantation; (4) ventricular thrombosis. Please refer to thrombus as thrombus, then if the authors want to characterized it by the shape and size will be find, but be clear and definite to call thrombus as it is. In the section: "Treatment process The patient started triple anti-thrombotic drugs (aspirin enteric-coated tablets 0.1 g qd, clopidogrel hydrogen sulfate 75 mg qd, dabigatran ester capsules 110 mg bid)." Please, you can express the dosing schedule using "daily" and "twice daily." Here's the revised sentence: "The patient initiated a regimen of triple anti-thrombotic medications (daily aspirin enteric-coated tablets at 0.1 g, daily clopidogrel hydrogen sulfate at 75 mg, and dabigatran etexilate capsules at 110 mg twice daily)...."

Response:I am very grateful for your careful review. He sought further medical treatment at our hospital. The patient sought further medical treatment a week after discharged, that understanding is correct. We have made the modifications to our paper according to your advice. These are very useful advice. The modified part is highlighted in yellow in the manuscript.

6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field? Yes, they are This study makes a significant contribution to the medical field by providing valuable information to guide the management of left ventricular thrombus. The current American Association guidelines typically recommend a three-month course of oral anticoagulants. However, this case study highlights the importance of extended treatment and continuous monitoring of the thrombus, even after the patient is discharged.

Response: Thank you for your compliments to our manuscript.

7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? The discussion should content more bibliographic citation to back up their conclusions. If Im not mistaken I could recognize only 3 citation, please add more citations to back up your conclusion.

Response: Thank you for your useful advice. We have added four citations to the manuscript. The added citations are as follows:

3. Silvia Gianstefani MD, Abdel Douiri PhD, Ioannis Delithanasis MD, Toby Rogers MBBS, Arup Sen MBBS, Sundeep Kalra MBBS, Langton Charangwa BSc, Joseph Reiken MSc, Mark Monaghan PhD, Philip MacCarthy MBChB, PhD. Incidence and predictors of early left ventricular thrombus after ST-elevation myocardial infarction in the contemporary era of primary percutaneous coronary intervention. *The American Journal of Cardiology*. 2014;113:1111-1116. [PMID: 24485697 DOI: 10.1016/j.amjcard.2013.12.015.

4. Weinreich DJ, Burke JF, Pauletto FJ. Left ventricular mural thrombi complicating acute myocardial infarction. Long-term follow-up with serial echocardiography. *Ann Intern Med*. 1984 , 100(6) : 789-794. [PMID: 6721297 DOI: 10.7326/0003-4819-100-6-789]

11. Huang D, Wong CL, Cheng KW, Chan PH, Yue WS, Wong CK, Ho CW, Wong ICK, Chan EW, Siu CW . Impact of provision of time in therapeutic range value on anticoagulation management in atrial fibrillation patients on warfarin. *Postgrad Med J*. 2018, 94(1110): 207-11. DOI: 10.1136/postgradmedj-2017-135457.

12. Esteve-Pastor MA, Rivera-Caravaca JM, Roldán-Rabadán I, Roldán V, Muñoz J, Raña-Míguez P, Ruiz-Ortiz M, Cequier Ángel; Bertomeu-Martínez V, Badimón L, Anguita M, Lip Gregory Y H; Marín F. Quality of oral anticoagulation with vitamin K antagonists in 'real

world' patients with atrial fibrillation: a report from the prospective multicentre FANTASIA registry[J]. *EP Europace*. 2018, 20(9): 1435-41.[PMID: 29095971 DOI: 10.1093/europace/eux314.

8 Illustrations and tables. Are the figures, diagrams, and tables sufficient, good quality and appropriately illustrative, with labeling of figures using arrows, asterisks, etc, and are the legends adequate and accurately reflective of the images/illustrations shown? No, they are not. The impact of this manuscript could be significantly enhanced if it included all the echocardiogram images captured throughout the course of the case. Additionally, it would be beneficial if the thrombus size were consistently measured in a similar fashion across all the images for a more comprehensive analysis.

Response: Thank you for your constructive suggestions. We have included all the echocardiogram images captured throughout the course of the case.

10 Units. Does the manuscript meet the requirements of use of SI units? Yes, it does

Response: Thank you for your comments.

11 References. Does the manuscript appropriately cite the latest, important and authoritative references in the Introduction and Discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references?

Please see comment under discussion.

Response: Thank you for your advice. We have modified the paper according to your comments mentioned before.

12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? To enhance the manuscript, improvements in the organization of the timeline of events and grammar correction are necessary.

Response: We are thankful for your constructive suggestions. We have revised the paper based on the comments before to review the timeline and grammar.

14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? The consent term was written in Chinese Observation: Please mention the source of guidelines. To mention the source of guidelines referenced in this manuscript, you could say something like: "The guidelines mentioned in this manuscript are primarily derived from [Source Name or Organization], which provide recommendations for the management of [specific medical condition]."

Replace "[Source Name or Organization]" with the actual name of the source or organization from which the guidelines were obtained.

Response:We are grateful for your advice. This study was approved by the Ethics Committee of Zibo Municipal Hospital (approval number: #20230118, approval date: January 18, 2023).

Specific comments to authors

1.In the abstract and throughout the manuscript, there are instances of text like +ADw-html+AD4APA-p+AD4-. Please correct these.

Reply: Thank you for your comment. We have deleted the text mentioned. It is generated by the system, which was not originally incorporated in our manuscript.

2.In the abstract: However, the manner in which the observations are presented in the manuscript may not be optimal. What is meant by this? Perhaps this should be omitted.

Reply: Thank you for your advice. We have deleted this sentence.

3.In the section on laboratory examinations, the word "oratory" appears, presumably intended to be "laboratory". Similarly, in the treatment section, the word "eatment" seems to be a typographical error for "treatment".

Reply: Thank you for your advice. The word "oratory" should be "laboratory" and "eatment" should be "treatment". We have carefully checked our manuscript and modified the sentences.