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315-321 Lockhart Road, Wan Chai, Hong Kong, China

ESPS Peer-review Report

Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8459

Title: The utility of intravascular imaging for coronary artery disease management

Reviewer code: 00238092

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-28 19:51

Date reviewed: 2014-01-08 12:28

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In this review article, Jegere et al summarized the current application of intravascular ultrasound (IVUS) and OCT (optical coherence tomography) on the evaluation and management of coronary lesions. They referred to various aspects of the techniques, and the discussion seems comprehensive. However, this reviewer would like to suggest rearranging the structure and/or the subtitles for the readers to grasp and follow the context easily. The figure legends, currently incorporated in the text, should be removed. Are the authors envisioning that IVUS or OCT could potentially substitute coronary angiography completely, or angiography will be always necessary anyway?



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<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

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ESPS Peer-review Report

Name of Journal: World Journal of Cardiology

ESPS Manuscript NO: 8459

Title: The utility of intravascular imaging for coronary artery disease management

Reviewer code: 00227341

Science editor: Gou, Su-Xin

Date sent for review: 2013-12-28 19:51

Date reviewed: 2014-01-11 01:20

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

IVUS and OCT are important modalities in understanding the in vivo pathophysiology of coronary artery disease, in predicting outcome of percutaneous coronary intervention (PCI) and in evaluating of coronary stents. In this review, the Authors summarize the potential clinical application of IVUS and OCT in patients with coronary artery disease for planning intervention and PCI guidance. The paper is generally well-written and interesting. I suggest to make some corrections: - pag 6, line 8: Several studies have shown good correlation between these IVUS measurements and FFR values - Figure 1: Sensitivity and specificity curve for IVUS-derived MLA to predict FFR ≤0.80; B: Receiver-operating characteristic curve for IVUS-derived MLA to predict FFR ≤0.80; C: Sensitivity and specificity curve for OCT-derived MLA to predict FFR ≤0.80 - the figure legends, incorporated in the text, should be removed - please, specify the numbers in the paragraph "References" - Please, a comment on the recent consensus statement that summarizes 'best practices' for use of adjunctive diagnostic modalities " Lotfi A, Jeremias A, Fearon WF, Feldman MD, Mehran R, Messenger JC, Grines CL, Dean LS, Kern MJ, Klein LW. Expert consensus statement on the use of fractional flow reserve, intravascular ultrasound, and optical coherence tomography: A consensus statement of the society of cardiovascular angiography and interventions. Catheter Cardiovasc Interv. 2013 Oct 6. doi: 10.1002/ccd.25222. [Epub ahead of print] PubMed PMID: 24227282.