



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: bpgoffice@wjgnet.com

http://www.wjgnet.com

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 10909

Title: MRI AND MDCT ASSESSMENT OF EXTRACELLULAR COMPARTMENT IN ISCHEMIC AND NONISCHEMIC MYOCARDIAL PATHOLOGIES

Reviewer code: 02639698

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-28 22:50

Date reviewed: 2014-05-01 17:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

concise and well written review, clinically useful. A paragraph dealing with costs should be added



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Name of journal: World Journal of Cardiology

ESPS manuscript NO: 10909

Title: MRI AND MDCT ASSESSMENT OF EXTRACELLULAR COMPARTMENT IN ISCHEMIC AND NONISCHEMIC MYOCARDIAL PATHOLOGIES

Reviewer code: 00504181

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-28 22:50

Date reviewed: 2014-05-03 14:42

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input 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"/> Existing	<input type="checkbox"/> High priority for publication
<input 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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This review summarizes recent developments in the of assessment extracellular compartment by MRI and MDCT and their applications in a variety of myocardial pathologies, with emphasis on ischemic and nonischemic cardiomyopathy. The manuscript is well written, along with 9 figures and 1 table, and elegantly provides the current state-of-the-art on this topic to the non-expert reader. minor points Abstract, line 4, a word is missing, probably 'pathologies'. Figure 1: typographical error: 'scarroid' Pages 6 and 7, the term 'subtle infarct' may be replaced by 'small infarcted areas' Page 31, line 3, please delete the word 'invisible'.



ESPS PEER REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 10909

Title: MRI AND MDCT ASSESSMENT OF EXTRACELLULAR COMPARTMENT IN ISCHEMIC AND NONISCHEMIC MYOCARDIAL PATHOLOGIES

Reviewer code: 01194590

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-28 22:50

Date reviewed: 2014-05-04 20:25

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input 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"/> Existing	<input type="checkbox"/> High priority for publication
<input 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	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> Existing	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In this invited review, Maythem Saeed et al focused the assessment of extracellular volume (ECV) in ischemic and non-ischemic myocardial diseases by MRI and MDCT. Given expansion of ECV is associated with mechanical dysfunction, arrhythmia and mortality, ECV evaluation provides an important parameter for clinical care. The gold standard method for estimation of ECV in patients has been sub-endocardial biopsy. However, biopsy has relatively high inherent risk and is limited to small regions. Both equilibrium contrast enhanced MRI/MDCT and MRI T1 mapping are currently used as an alternative to invasive endomyocardial biopsies. Furthermore, ECV data may aid in differentiating ischemic from non-ischemic diseases in cases of uncertainty although both modalities have limitations. The limitations were extensively discussed in this review. The review was well written and I have no major comments. Only few minor typos were mentioned as follows.

1. In page 4, ".....to aid in the assessment of functional status of myocardial microcirculation, microvascular integrity and myocardial viability, including positron emission tomography, contrast-enhanced echocardiography and contrast-enhanced magnetic resonance (MR) imaging and contrast enhanced MDCT 3-7_ENREF_7 3 8." What means ENREF?
2. In Page 7 "Accordingly, new strategies have been developed to quantify diffuse myocardial fibrosis and subtle infarct using equilibrium contrast enhanced MRI/MDCT and T1-mapping techniques 19-27_ENREF_29." What means ENREF?
3. In page 26, "Recent clinical and experimental studies have shown that stem cells



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reduce infarct size and improve LV function in both AMI and scar 149-152_ENREF_138 and provide new information regarding the association between the expansion of ECV and clinical outcomes.”
What means ENREF?