

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 71767

Title: Novel way of patent foramen ovale detection and percutaneous closure by intracardiac echocardiography: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05138559

Position: Associate Editor

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

Manuscript submission date: 2022-05-12

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-06-17 07:02

Reviewer performed review: 2022-06-25 21:32

Review time: 8 Days and 14 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 Grade E: Do not publish
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 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
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SPECIFIC COMMENTS TO AUTHORS

In this study the authors reported the implantation of a device for the closure of a patent foramen ovale (PFO) in order to prevent a recurrence of stroke by monitoring the procedure with intracardiac echocardiography (ICE). Some criticism has to be manifested. They talk about the PFO as an abnormality certainly causally connected to the stroke and they depicted the procedure to close it as certainly life-saving. Unfortunately the PFO is very weakly connected to embolic events (stroke in particular) in the only prospective longitudinal study reported in the literature [1]. Most of our knowledge regarding the relationship between the PFO and stroke is based on data of association of PFO and stroke in weakly designed studies such as the case control studies. In addition the intervention of closure is fraught with possible certain complications in the follow-up [2]: thrombus formation on both facets of the umbrella device, most rarely umbrella dislocation and atrial arrhythmias (atrial fibrillation in particular) and some patients refer atypical chest pain after the closure. So the authors should present the case emphasizing the pros and cons of this procedure. The authors say that ICE has got higher potential than transesophageal echocardiography in visualizing right cardiac masses (atrial mixoma and chiari network) and eventually to better visualize the anatomic features of the foramen ovale. They however forgot to mention the higher potential of this approach in visualizing major clinical problems such as lead endocarditis masses and post lead extraction floating masses inside the right atrial chamber the so called "ghosts" [3,4]. That must be added in order to better describe the ICE potential. The intracardiac echocardiographic images are difficult to decipher because of poor quality even for an expert in the field. Since they support the

main result of the study, images of better quality should be provided; alternatively a scheme put aside that could explain the details of the specific tomographic view has to be added.

REFERENCES

1. Meissner I, Khandheria BK, Heit JA, Petty GW, Sheps SG, Schwartz GL, et al. Patent foramen ovale: innocent or guilty? Evidence from a prospective population-based study. *J Am Coll Cardiol.* 2006;47(2):440-5.
2. Krumdsdorf U, Ostermayer S, Billinger K, Trepels T, Zadan E, Horvath K, et al. Incidence and clinical course of thrombus formation on atrial septal defect and patent foramen ovale closure devices in 1,000 consecutive patients. *J Am Coll Cardiol.* 2004;43(2):302-9.
3. Caiati C, Pollice P, Lepera ME, Favale S. Pacemaker Lead Endocarditis Investigated with Intracardiac Echocardiography: Factors Modulating the Size of Vegetations and Larger Vegetation Embolic Risk during Lead Extraction. *Antibiotics (Basel, Switzerland).* 2019;8(4).
4. Caiati C, Luzzi G, Pollice P, Favale S, Lepera ME. A Novel Clinical Perspective on New Masses after Lead Extraction (Ghosts) by Means of Intracardiac Echocardiography. *Journal of clinical medicine.* 2020;9(8).

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Title: Novel way of patent foramen ovale detection and percutaneous closure by intracardiac echocardiography: A case report

Provenance and peer review: Unsolicited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05827902

Position: Editorial Board

Academic degree: FACC, MD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: China

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Reviewer chosen by: Dong-Mei Wang

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Reviewer performed review: 2022-07-04 17:43

Review time: 1 Hour

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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No
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SPECIFIC COMMENTS TO AUTHORS

The authors describe a case of PFO closure with ICE assistance. They have described the case and technique involved in good detail. There are definite advantages to ICE use in PFO closure as highlighted by authors - no need for TEE operator which conserves resources, potentially better imaging evaluation of PFO, ability to perform valsalva maneuver in the absence of anesthesia. This is a technique that should be highlighted in the interventional community.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 05138559

Position: Associate Editor

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Italy

Author's Country/Territory: China

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Reviewer chosen by: Jing-Jie Wang

Reviewer accepted review: 2022-07-26 11:47

Reviewer performed review: 2022-07-27 06:43

Review time: 18 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 checked="" type="checkbox"/> Accept (General priority) <input 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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statements

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

SPECIFIC COMMENTS TO AUTHORS

The paper has been substantially improved.