

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37093

Title: Evaluation of revascularization after total arch replacement in common carotid artery occlusion

Reviewer's code: 00735414

Reviewer's country: Croatia

Science editor: Fang-Fang Ji

Date sent for review: 2017-11-17

Date reviewed: 2017-11-18

Review time: 1 Day

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Please do corrections due to the minor mistakes: Fig. 4. should be placed as Fig 1. TAR abbreviation must be explained. Please explain why CCA occlusion was recognised on day 1 and thrombus removal was tried on day 9. Probably earlier thrombectomy may be more efficient and bypass avoided. Add few sentences discussing this issue.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37093

Title: Evaluation of revascularization after total arch replacement in common carotid artery occlusion

Reviewer's code: 00722050

Reviewer's country: Canada

Science editor: Fang-Fang Ji

Date sent for review: 2017-11-17

Date reviewed: 2017-11-19

Review time: 2 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Blockage along with sudden restoration of blood following ischemia, results in several cascading events, some of which list the massive ROS production. This factor plays an important role in the pathophysiology of ischemia. NADPH oxidase complex in mitochondria complex is believed to be the major source for ROS production. Common carotid artery occlusion (CCAO) model is often chosen for the study where intracellular ROS and NO levels as well as the NADPH oxidase activity are investigation targets. I would suggest to consider the infection potentiality and cite the following reference, because this factor cannot be ruled out in these surgical patients: Biomed Pharmacother. 2017 Nov;95:153-160. doi: 10.1016/j.biopha.2017.08.066. Epub 2017 Sep 12. Cardiovascular dysfunction in sepsis at the dawn of emerging mediators. In this review, the authors list the mediators of cardiovascular patients and this may be crucial to add in



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the discussion.

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37093

Title: Evaluation of revascularization after total arch replacement in common carotid artery occlusion

Reviewer's code: 00722122

Reviewer's country: Pakistan

Science editor: Fang-Fang Ji

Date sent for review: 2017-11-17

Date reviewed: 2017-11-22

Review time: 4 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

The case report 'Evaluation and Timing of Revascularization for Common Carotid Artery Occlusion' is a nicely written manuscript. However it requires some minor corrections as follows 1. In the abstract write key words in alphabetical order 2. In the last para of Introduction, write full form of TAR 3. The figures citation is not in chronological order please correct it. The correct sequence is 1a, 1b, 2a, 2b, 3a, 3b and 4 and NOT 1a, 2a, 3a then 1b then 3b etc . Either change the nomenclature of figures or change in text. 4. In discussion, 2nd para, correct spelling of hemianopsia to hemianopia

PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 37093

Title: Evaluation of revascularization after total arch replacement in common carotid artery occlusion

Reviewer's code: 02666537

Reviewer's country: Netherlands

Science editor: Fang-Fang Ji

Date sent for review: 2017-11-17

Date reviewed: 2017-11-22

Review time: 5 Days

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

Described is a case of CCA occlusion related to emboli after total arch replacement. Although sonography revealed flow improvement, the patient had epilepsy. SPECT subsequently revealed impaired brain perfusion and insufficient collateral blood flow, after which a bypass operation was done. It is concluded that in response to complaints after total arch replacement, blood flow and brain perfusion are best assessed at the same time. The paper is of interest, but presentation is poor. Specific comments: 1. Title: unclear, change to something like "Evaluation of revascularization after total arch replacement in common carotid artery occlusion". 2. Abstract: very unclear (esp. sentence 2,3,5 and 6). Subsequently define the purpose of the study, the methods (surgeries, imaging), the results and the conclusion. 3. Introduction: refs. are not numbered. 4. Last sentence of introduction, last sentence of discussion: be more

specific by stating that blood flow as well as perfusion should be assessed both in total arch replacement treated CCAO patients who continue to have neurological symptoms.