



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 62297

**Title:** Acute myocardial infarction in twin pregnancy after assisted reproduction: a case report and literature review

**Reviewer's code:** 01293596

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Chief Doctor, Manager

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

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**Reviewer chosen by:** Jia-Ping Yan

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<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<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
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

The authors showed myocardial infarction in a case with twin pregnancy after assisted reproduction. The case was properly diagnosed and treated without any serious complications. General comment; The strong point of this study was to have an alert for a risk of acute coronary event in pregnant women who had twin pregnancy with assisted reproduction. However, the lack of coronary imaging or follow up coronary angiography made the etiology of coronary events ambiguous in such patients. Specific comments; The discussion is too lengthy, and should be focused more on the strength and limitation of the present report. It is important to accentuate the risk of acute coronary event in assisted reproduction. Figure 1; the leads should be clarified. Noisy parts of ECG should be omitted. Figure 2; CAG was shown in only one direction. At least two directions should be shown with clear information. Furthermore, images of RCA in figure 2 look like TIMI 1 or 2 flow grade. Table 1; in the last 2 cases, the risk factors for coronary events were not determined. Discussion: the authors should discuss more with regard to the safety and risk of medications for the mother and fetus.