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PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 66503

Title: Intermittent appearance of right coronary fistula and collateral circulation: A case

report.

Reviewer's code: 05904643

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: China

Manuscript submission date: 2021-03-29

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-03-30 13:56

Reviewer performed review: 2021-04-05 07:15

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Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[Y] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	 [] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No
Peer-reviewer statements	Peer-Review: [Y] Anonymous [] Onymous Conflicts-of-Interest: [] Yes [Y] No



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SPECIFIC COMMENTS TO AUTHORS

Only a few reports on congenital coronary artery fistula with concurrent collateral circulation have been reported in patients. In this manuscript, and the author found "ghostlike" intermittent appearance of coronary ventricular fistula and collateral branching, this phenomenon seems to have not been reported before. The establishment of this collateral circulation may be caused by insufficient blood supply caused by coronary fistula However, there are still some unclear questions about this article . 1. this article does not specifically describe the relationship between the cardiac cycle and the appearance of coronary fistulas and collaterals, nor does it explain why this phenomenon occurs. 2.this article did not specify which drugs the author used for treatment. 3.During the follow-up period after treatment, the article only introduced the disappearance of the patient's symptoms without further angiographic examination. We do not know why the symptoms disappeared after treatment, whether it was the reduction of coronary fistula shunt or the establishment of coronary collateral circulation.