

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 00039411

Reviewer's country: Argentina

Science editor: Fang-Fang Ji

Date sent for review: 2017-06-21

Date reviewed: 2017-06-25

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 checked="" 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 type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

Figure 2, A and B, they are supposed to be measured at different levels, but results are the same in both figures.

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Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 01204088

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2017-06-21

Date reviewed: 2017-06-29

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 type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
		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

Banga et al. described a patient with perimembranous interventricular septum aneurysm extending into the LVOT requiring apposition of the Edwards SAPIEN XT skirt at annulus with most of the valvular metallic frame in supra-annular position, and concluded that the present case is the first report of the utilization of TAVR procedure in a patient with septal aneurysm and need of higher aortic positioning with an Edward SAPIEN XT valve. Although this case report is interesting, there are several concerns for the manuscript. 1) There is a concern for conflict of interest. In the cover letter: I and the other authors have no financial or other interest concerning any products or testing or anything related to this manuscript. In the Disclosures in the text: Dr. Sudhir Mungee is in Speakers Bureau for Edwards Life sciences. The other authors have no conflicts to report. Please make sure about the problem. 2) Page 1, line 15-17. Showing the NYHA functional class and the pressure gradient and valvular area of the aortic valve in this patient will be appreciated for better understandings of the patient. 3)



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References. There are only 4 papers in the list, and 3 of them are published before 2009. If possible, more recent and more adequate papers will be appreciated. 4) Page 1, line 22. and many others. A space will be required between 14.5 and mm.

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 00505382

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-07

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"/> Plagiarism	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" 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 checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

references should be updated; preoperative details about aortic valve disease should be presented; comorbidities and clinical presentation should be briefly discussed since patient has an STS PROM of 12%

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 02446706

Reviewer's country: Netherlands

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-10

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" 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"/> 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 checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The case report is nicely presented. Only minor error found on page 2:Line 14: Please consider "paravalvular" instead of paravalular.

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 00259340

Reviewer's country: Spain

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-10

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

The authors present a nice case of Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension treated with TAVI. The procedure was successful and I congratulate the authors for that. However, in order to report it I think we could take advantage of it and add some discussion points in the manuscript. - Brief comments on incidence, causes, types, outcomes and management for Interventricular Septum Aneurysm. - This condition, modifies the antithrombotic therapy or the follow-up Schedule?

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 00227375

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-10

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

This is a rare case report about membranous interventricular septum aneurysm in the LVOT requiring TAVR. This manuscript is nicely structured and well written. I have no question about this manuscript.

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 02446694

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-11

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

The authors reported the patients with left ventricular outflow tract aneurysm, who underwent transcatheter aortic valve implantation (TAVI). This case report seems to be interesting. I think that the readers will be interest in the skill and important point of TAVI in the more aortic position. The authors had better emphasize these points more closely.

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 35101/37453

Title: Transcatheter Aortic Valve Replacement in Membranous Interventricular Septum Aneurysm with Left Ventricular Outflow Tract Extension.

Reviewer's code: 01593993

Reviewer's country: Spain

Science editor: Fang-Fang Ji

Date sent for review: 2017-07-06

Date reviewed: 2017-07-14

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" 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
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		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is an interesting case that may be helpful for the reader facing similar issues while implanting a TAVI. I would discuss further the reason why the authors selected this type of valve and whether other options may be also useful in this context. Minor issue: Image 3C: it is not clear for me whether this is pre-procedure or follow-up. It is difficult to distinguish where the valve is located or it is just pre-procedural calcified valve.