



PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 40110

Title: Tako-tsubo Syndrome. Diverse presentations for a single disease. Case Report Serie

Reviewer's code: 00060493

Reviewer's country: Canada

Science editor: Jin-Lei Wang

Date sent for review: 2018-06-05

Date reviewed: 2018-06-05

Review time: 4 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	(General priority)	Peer-reviewer's expertise on the topic of the manuscript:
<input type="checkbox"/> Grade E: Do not publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Minor revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Major revision	<input type="checkbox"/> General
		<input checked="" type="checkbox"/> Rejection	<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The key weakness of this paper lies with the lack or originality. Several papers have already shown these findings.



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Group**

7901 Stoneridge Drive, Suite 501,
Pleasanton, CA 94588, USA
Telephone: +1-925-223-8242
Fax: +1-925-223-8243
E-mail: bpgoffice@wjgnet.com
https://www.wjgnet.com

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- The same title
- Duplicate publication
- Plagiarism
- No

BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 40110

Title: Tako-tsubo Syndrome. Diverse presentations for a single disease. Case Report Serie

Reviewer's code: 02565578

Reviewer's country: Italy

Science editor: Jin-Lei Wang

Date sent for review: 2018-06-05

Date reviewed: 2018-06-07

Review time: 1 Day

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The Authors report three cases of takotsubo cardiomyopathy in 1 male and 2 female patients. The scope of the publication is to underline the variability of the clinical presentation of takotsubo cardiomyopathy, as encountered in the clinical experience of



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the Authors. Numerous recent publications exist about this publication, including guidelines for diagnosis and therapy. The Authors attempt to use their experience as an educational opportunity for other clinicians. However, to serve for this scope, the content of the article should be revised. 1. The title of the manuscript is different from the title present in the submission system. It should contain the phrase "case reports". 2. In the introduction, I would suggest to add a statement or build on the sentence " We describe three cases of atypical TTS" to indicate exactly where and when the cases were diagnosed and treated and to indicate that these are indeed the clinical cases encountered in the Authors' medical practice. 3. The Authors use the term "tako-tsubo syndrome" throughout the article, however the clinical entity that they describe and discuss is also called differently, "takotsubo cardiomyopathy" being the most common term. Indeed, the Authors used this term as a keyword for the article. Could the authors check whether there is any recommendation for the use of one term rather than the other in cardiology? Also, considering the origin of the word "takotsubo" (it refers to a fishing pot used for trapping octopus and is descriptive of apical ballooning) and its use by the Japanese authors in english, it is better written not hyphenated and must not be written capitalized. In this regard, the use of the acronym TTS is also doubtful, if "takotsubo" is actually one word. 4. The Authors report the results of the "ultrasensitive troponin assay". Do they mean "high-sensitivity troponin assay" or is it any different? Also, a conventional troponin assay is sufficient for takotsubo cardiomyopathy diagnosis. Did the Authors have a possibility to evaluate B-type natriuretic peptide (BNP) in the serum? While the troponin levels are elevated but still relatively low given the extension of the dysfunctional myocardium, the levels of BNP are significantly elevated in the takotsubo cardiomyopathy. 5. Even if the clinical presentation of the takotsubo cardiomyopathy can be different, its diagnosis is based on the specific criteria. To increase the educational value of this publication, I would suggest to summarize the clinical presentation and



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E-mail: bpgoffice@wjgnet.com
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diagnosis of the describes cases with reference to the diagnostic criteria for the takotsubo cardiomyopathy (2014 European Society of Cardiology (ESC) Takotsubo Syndrome Diagnostic Criteria). The table that is already present in the manuscript could be expanded to include all diagnostic criteria and their presence/absence in the described cases. Then, it could serve as an educational tool for the takotsubo cardiomyopathy diagnosis. 6. The manuscript should be re-read in order to eliminate some minor errors, e.g., corrections to the original version are still present next to the previous version's wording. 7. Ethical issues: confidentiality is respected, but the Authors did not obtain an informed consent from patients.

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BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 40110

Title: Tako-tsubo Syndrome. Diverse presentations for a single disease. Case Report Serie

Reviewer's code: 00257390

Reviewer's country: Germany

Science editor: Jin-Lei Wang

Date sent for review: 2018-06-05

Date reviewed: 2018-06-09

Review time: 4 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
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<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This paper presents a case series of 3 patients presenting with symptoms of Takotsubo cardiomyopathy. The paper is fairly written and presented. Some editing for typos and syntax will be necessary. The authors may want to more clearly highlight the novelty of



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the 3 cases presented in this paper in comparison to plethora of previous other cases presented with this disease, as mentioned in the current literature. Some echocardiographic images for e.g. demonstrating LVOT obstruction would be useful. In addition, the role of advanced imaging with cardiac MR should be mentioned in this context.

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