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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 41197

Title: Current evidence of drug-elution therapy for infrapopliteal arterial disease

Reviewer's code: 02919566

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2018-07-30

Date reviewed: 2018-08-08

Review time: 9 Days

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

SPECIFIC COMMENTS TO AUTHORS

The review of Spiliopoulos and coll is aimed to review drug-elution therapy for infrapopliteal cardiovascular disease. The authors completely reviewed the available data about this topic. Minor comments - Data about comparison between bypass surgery and percutaneous procedures are not reported. If data are lacking this hould be



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reported in the conclusions. - The bibliography is complete, but references are not in the requested format. There are also differences among the different citations in the format used.

INITIAL REVIEW OF THE MANUSCRIPT

Google Semem		
[]	The same title	
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[Y] No		
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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 41197

Title: Current evidence of drug-elution therapy for infrapopliteal arterial disease

Reviewer's code: 00257390

Reviewer's country: Germany

Science editor: Fang-Fang Ji

Date sent for review: 2018-09-11

Date reviewed: 2018-09-12

Review time: 1 Day

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

SPECIFIC COMMENTS TO AUTHORS

In this overview article Spiliopoulos and colleagues give an overview on the role of drug eluting stents and drug eluting balloons for the treatment of PAD in patients with critical limb ischemia. The paper is nicely written and presented. However, some specific points need to be addressed. 1. DES section: The authors need to mention which segments of



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the crural arteries were treated in the randomized trials (proximal / mid or distal by study protocols). Treatment of proximal crural segments with DES is much more frequent and possibly associated with better outcomes than treatment of the mid part of crural vessels. As the authors mention stent placement in the distal part of crural arteries or in pedal arteries is associated with short- and long-term complications and should be avoided. 2. The parallelism to coronary DES for late stent thrombosis needs to be reevaluated. According to recent data, the rate of late stent thrombosis is higher with BMS than with DES. The question why this may not be the case with placement of the same stent devices in the infrapopliteal regions needs to be addressed. 3. In recent years percutaneous atherectomy by rotational, orbital, directional or hybrid devices has broadened the spectrum of invasive angiology. Some data on atherectomy in BTK lesions (technical challenges, higher probability of spasm, slow flow due to small lumen or vessel tortuosity) need to be mentioned and discussed (e.g. Lee-MS et al, Cath. Cardiovasc. Interv. 2016). 4. In addition, so overview articles on drug eluting balloons for femoropopliteal lesions need to be mentioned and discussed (Korosoglou et al, J Cardiovasc Surg, 2018). 5. Furthermore, the authors need to discuss why drug eluting balloons did not achieve the same favorable results with BTK compared to femoropopliteal lesions. Some details need to be discussed and mentioned in terms of different anatomy, components of atherosclerotic plaque, circumferential calcification ect.) or pathophysiology. 6. Overall, it needs to be mentioned that current guidelines propagate the interventional treatment of infrapopliteal lesions in patients with ischemic pain at rest and critical limb ischemia but not in patients with claudication symptoms. 7. Reference #16 is followed by reference #12. Please correct. 8. Reference #27 (PADI trial) does not match with the reference in the text. Please correct. 9. Some further typos and errors need to be corrected.



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INITIAL REVIEW OF THE MANUSCRIPT

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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 41197

Title: Current evidence of drug-elution therapy for infrapopliteal arterial disease

Reviewer's code: 02511891

Reviewer's country: Turkey

Science editor: Fang-Fang Ji

Date sent for review: 2018-09-11

Date reviewed: 2018-09-13

Review time: 2 Days

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

SPECIFIC COMMENTS TO AUTHORS

This is a high quality review written by experienced authors. 1- I suggest to add some sentences about novel drug delivery catheters (Catheter Cardiovasc Interv. 2018 Feb 1;91(2):296-301). 2- Better to point you some recommendations related with this topic from our recent guidelines Aboyans et al. Eur Heart J. 2018 Mar 1;39(9):763-816. 3- CrI



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needs to be defined as Credible interval in the text.

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