



PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 45492

Title: Sudden cardiac death and wearable defibrillators – which patient might benefit?

Reviewer’s code: 00227375

Reviewer’s country: Japan

Science editor: Jin-Lei Wang

Date sent for review: 2019-01-08

Date reviewed: 2019-01-11

Review time: 3 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" 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 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

This is an excellent systematic review about sudden cardiac death and wearable defibrillators. This manuscript is nicely structured and well written. I have no question about this manuscript.



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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: 45492

Title: Sudden cardiac death and wearable defibrillators – which patient might benefit?

Reviewer’s code: 00227341

Reviewer’s country: Italy

Science editor: Jin-Lei Wang

Date sent for review: 2019-01-08

Date reviewed: 2019-01-12

Review time: 2 Hours, 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:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" 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

The Authors present an analysis of the published data on wearable cardioverter-defibrillator (WCD) in different patient cohorts . In patients at high risk of SCD, either real or perceived, without a definite indication to ICD implantation, WCDs have been shown to offer effective temporary protection in different clinical settings, for



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patients with recent high-risk myocardial infarction with left ventricular dysfunction, even after myocardial revascularization procedures, heart failure with reduced ejection fraction, newly diagnosed dilated cardiomyopathy, ICD post-explant phase for infection, and bridge to cardiac transplantation. The authors focus the article on the history of defibrillation and on the risk factors of sudden death in the different cohorts of patients that have taken into consideration. But the title of the article refers to groups of patients who might benefit from the WCD and not on the risk factors of the individual cohorts. Here there is no reference to which patients awaiting heart transplantation. ESC guidelines recommend an ICD implantation for all patients listed for transplant in a New York Heart Association class IV, whereas WCD use as a bridge to transplant is an alternative (recommendation level class IIa and IIb, respectively). In addition another population who may benefit from an extended use of WCD is children and younger adults. In these patients the main causes of increased arrhythmogenic risk were cardiomyopathy, primary arrhythmia (without specification), and congenital heart disease especially in the ≤ 18 years of age cohort. Finally, in addition to the groups of patients in which there is a recommendation to use WCD, there are other groups of patients to be better defined up to now with indications considered unconventional, such as myocarditis, cardiomyopathy peripartum, tako-tsubo cardiomyopathy and chronic renal failure in the stage advanced. In this article there is no reference to these patients. I suggest reviewing the article by focusing the results and discussion about the effectiveness of WCD and its limitations in individual patient groups including patients with ischemic cardiomyopathy and nonischemic cardiomyopathy, patients with device infection, patients awaiting heart transplantation, patients with end-stage renal disease that represent a high-risk population for ICD implantation explaining the impressively high prevalence of arrhythmic events during the study period, patients with recent myocarditis and those with inherited channelopathies, and finally children and



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adolescent.

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PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

Manuscript NO: 45492

Title: Sudden cardiac death and wearable defibrillators – which patient might benefit?

Reviewer's code: 03722832

Reviewer's country: India

Science editor: Jin-Lei Wang

Date sent for review: 2019-01-08

Date reviewed: 2019-01-15

Review time: 16 Hours, 6 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:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input checked="" type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
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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

Most parts of the author's manuscript are redundant if the author is reviewing the current status of the "The wearable cardioverter-defibrillator"

INITIAL REVIEW OF THE MANUSCRIPT



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