



**PEER-REVIEW REPORT**

**Name of journal:** *World Journal of Cardiology*

**Manuscript NO:** 90051

**Title:** Predictors of permanent pacemaker implantation following transcatheter aortic valve replacement-the search is still on!

**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 05874907

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer’s Country/Territory:** Italy

**Author’s Country/Territory:** India

**Manuscript submission date:** 2023-11-21

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-12-12 11:22

**Reviewer performed review:** 2023-12-12 11:38

**Review time:** 1 Hour

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| <b>Scientific quality</b>                          | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| <b>Novelty of this manuscript</b>                  | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty   |
| <b>Creativity or innovation of this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |



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| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance   |
| <b>Language quality</b>   | <input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>   | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection          |
| <b>Re-review</b>  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No  |
| <b>Peer-reviewer statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous  |
|   | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

## SPECIFIC COMMENTS TO AUTHORS

The comments are all of appreciable value, despite the fact that the topic itself does not present much new in this area. The editorial is in urgent need of revision in formal writing, but overall presents a careful analysis of the article, with correct and interesting insights.



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**Provenance and peer review:** Invited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06324964

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** India

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**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-12-13 00:48

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**Review time:** 3 Hours

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|--|--|
| <b>Scientific quality</b>                          | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| <b>Novelty of this manuscript</b>                  | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty   |
| <b>Creativity or innovation of this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |



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|---|--|
| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance   |
| <b>Language quality</b>   | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>   | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection          |
| <b>Re-review</b>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |
| <b>Peer-reviewer statements</b>                                     | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous  |
|   | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

**SPECIFIC COMMENTS TO AUTHORS**

Pacemaker implantation after TAVR remains a recognized complication, and evaluation and opinion on its predictors are of great clinical relevance. Therefore, I believe that this Editorial is well presented with respect to past findings and new conclusions in the main article. Minor comments: 1) Lack of uniformity in the description of diabetes, atrial fibrillation, etc. 2) Please provide more detailed additional comments regarding the inconsistency between past facts and the current study regarding the effects of SEV and BEV differences on the stimulus delivery system. 3) Finally, while identifying predictive factors is important, TAVR is an important treatment modality for older AS patients. Please add new predictors and their significance to treatment choice and methodology in this regard.