

## ESPS Peer-review Report

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

**ESPS Manuscript NO:** 3330

**Title:** BERBERINE BEHIND THE THRILLER OF SYMPTOMATIC MARKED BRADYCARDIA

**Reviewer code:** 02510354

**Science editor:** Wen, Ling-Ling

**Date sent for review:** 2013-04-23 19:43

**Date reviewed:** 2013-05-01 04:23

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

This case, presenting a potential side effect of Berberine is nice and worth publication. The discussion section which is the most important in case reports is weak. My major recommendation is to shorten the case and prolongs the discussion. Some notes: 1. Language processing is needed 2. "ematochismic" exams is in Italian, I think. Please use blood analysis or other synonyms. 3. The rate of the sinus node did not differ at presentation or 10 days after stopping the Berberine. It was 40-45 and it remains 40-45. The high vagal tone in this sport man remains the same. The only different is the junctional rhythm, which was present and then disappears. Please discuss possible mechanism if any? 4. The symptoms are probably not due to the bradycardia itself but more due to the loss of AV synchronization during the junctional rhythm, as the bradycardia remains the same before and after. Please discuss. 5. There is an old animal study about the negative chronotropic effect of Berberine supporting the theory of not vagally mediated bradycardia (not via the muscarinic receptors). Please discuss. J Cardiovasc Pharmacol. 1985 Mar-Apr;7(2):307-15. Inotropic and chronotropic activity of berberine on isolated guinea pig atria.

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<input checked="" type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
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## COMMENTS TO AUTHORS

The paper by Cannillo et al. describes a rare side effect of oral berberine. The paper is interesting and the title attractive. There are some issues that require clarification or revision. 1.The author should provide briefly more information on drug half-life and excretion 2.It is not clear how the authors excluded an overdose of berberine (based on daily dosage or by blood sample?) 3.It is not clear if there is any other report in the literature on this side effect. If not, authors should state that this is the first report. 4.The use of English should be improved and rendered more appropriate throughout the manuscript (e.g.: " Holter monitoring" instead of "ECG Holter", "asymptomatic" instead of "asymtomatic", "with a R-R interval of 2.4 s" instead of "with an RR 2,4 second" and so on) 5.The first phrase of the introduction is not clear