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Flat C, 23/F., Lucky Plaza,  
315-321 Lockhart Road,  
Wan Chai, Hong Kong, China

### ESPS Peer-review Report

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

**ESPS Manuscript NO:** 6052

**Title:** PERCUTANEOUS CLOSURE OF PATENT FORAMEN OVALE: “CLOSED” DOOR AFTER THE LAST RANDOMIZED TRIALS?

**Reviewer code:** 02446694

**Science editor:** Qi, Yuan

**Date sent for review:** 2013-10-01 19:10

**Date reviewed:** 2013-10-04 05:37

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 type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input 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

The authors reviewed the results of clinical trials of percutaneous closure of patent foramen ovale in symptomatic patients. This review is well-written and very interesting. Major comments None. Minor comments The format of this manuscript did not match with that of "World Journal of Cardiology". Therefore, the authors should change it.



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**Reviewer code:** 02446684

**Science editor:** Qi, Yuan

**Date sent for review:** 2013-10-01 19:10

**Date reviewed:** 2013-10-05 17:16

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 type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

It's a well written paper on an interesting subject of great clinical impact. Although each physician handles in his/her everyday practice due to his/her personal training and experience, guidelines significantly influence every physician's decisions. The paper shows how a different, more cumulative and more thorough interpretation of studies related to a subject, in this case percutaneous closure of PFO, may alter results and affect guidelines in a way that these come closer to the specialist physician's sense of things. I therefore recommend the acceptance of the manuscript in our esteemed journal.



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**Title:** PERCUTANEOUS CLOSURE OF PATENT FORAMEN OVALE: “CLOSED” DOOR AFTER THE LAST RANDOMIZED TRIALS?

**Reviewer code:** 02510354

**Science editor:** Qi, Yuan

**Date sent for review:** 2013-10-01 19:10

**Date reviewed:** 2013-10-07 00:38

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 type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

### COMMENTS TO AUTHORS

Interesting review of these 3 trails. Please comment/give your opinion on PFO closure in current practice in patients where oral anticoagulation therapy is contraindicated. As these devices are non inferior to warfarin.



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**ESPS Manuscript NO:** 6052

**Title:** PERCUTANEOUS CLOSURE OF PATENT FORAMEN OVALE: “CLOSED” DOOR AFTER THE LAST RANDOMIZED TRIALS?

**Reviewer code:** 02446685

**Science editor:** Qi, Yuan

**Date sent for review:** 2013-10-01 19:10

**Date reviewed:** 2013-10-07 05:39

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 checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input 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

The authors review the indicated 3 trials about PFO closure. They conclude from their discussion that patients with cryptogenic strokes could profit from an Amplatzer device. The conclusion should be expressed more carefully. The discussion about the right strategy is still important, but the data for a conclusive judgement pro Amplatzer are still weak. ESC guidelines should be cited. In "Amplatzer" are sometimes typos.