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ESPS PEER REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 11815

Title: News on Arrhythmogenic Right Ventricular Cardiomyopathy: from genetics to

clinical manifestations, diagnostic challenges, and therapeutic options: a review.

Reviewer code: 02638028

Science editor: Ling-Ling Wen

Date sent for review: 2014-06-08 17:34

Date reviewed: 2014-06-14 22:47

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[] Accept
[] Grade B: Very good	[] Grade B: Minor language polishing	[] Existing	[Y] High priority for
[] Grade C: Good	[] Grade C: A great deal of	[] No records	publication
[] Grade D: Fair	language polishing	BPG Search:	[] Rejection
[] Grade E: Poor	[] Grade D: Rejected	[] Existing	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

This is a well-written, comprehensive review about ARVC. Some points should be addressed. P9L11 The meaning of the sentence "Both sarcoidosis and ARVC can be progressive patholoties,." is unclear. P9L25 left. to-right \rightarrow left-to-right



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Title: News on Arrhythmogenic Right Ventricular Cardiomyopathy: from genetics to

clinical manifestations, diagnostic challenges, and therapeutic options: a review.

Reviewer code: 02457934

Science editor: Ling-Ling Wen

Date sent for review: 2014-06-08 17:34

Date reviewed: 2014-06-23 19:21

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
[Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[Y] Accept
[] Grade B: Very good	[] Grade B: Minor language polishing	[] Existing	[] High priority for
[] Grade C: Good	[] Grade C: A great deal of	[] No records	publication
[] Grade D: Fair	language polishing	BPG Search:	[] Rejection
[] Grade E: Poor	[] Grade D: Rejected	[] Existing	[] Minor revision
		[] No records	[] Major revision

COMMENTS TO AUTHORS

1. This manuscript has well-reviewed the status and progress in ARVC in recent years. To me, the progress in genetic detection, CRM and RF in ARVC are evident; and the first aspect on genetic detection was written in detail, and the later two aspects, CMR and RF, should be strengthened. 2. Some spell and typographical errors should be re-edited, such as "In trould bacardiac left.to-right shunts" (page 9, line 25), "and interventricular septal scar at imaging.." (page 9, line 8) and "be progressive pathologies,." (page 9, line 11).