



ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 20470

Title: Short and long term outcomes of 200 patients supported by continuous-flow left ventricular assist devices

Reviewer’s code: 00227375

Reviewer’s country: Japan

Science editor: Xue-Mei Gong

Date sent for review: 2015-06-06 14:19

Date reviewed: 2015-06-13 21:19

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input type="checkbox"/> No	

COMMENTS TO AUTHORS

The authors present a review of experience with LVAD and analytical results about postoperative prognosis. Although the survival rate for patients on LVAD supports was inferior to the survival rate of heart transplant recipients, it was relatively high. The incident ratios of pump thrombosis and severe driveline infection have declined significantly in recent years. As for prognostic factors, preoperative liver dysfunction, ventilator dependent respiratory failure (VDRF), and RV failure required RVAD were significant predictors of post LVAD mortality. The authors have suggested that these factors should be taken into account in the patient selection process. This manuscript is nicely structured and very interesting. However, the primary criticism of this manuscript is that there seems to be several mistakes in data. The following are my comments. (Comments) 1. Abstract, Results, lines 9 and 10 “On multivariate analysis, preoperative liver dysfunction and RV failure were significant predictors of post LVAD survival.” Discussion, first page, second paragraph, lines 1-3 “Our multivariate analysis demonstrated that preoperative liver dysfunction, and postoperative VDRF, tracheostomy, and RV failure were significant predictors of post LVAD mortality.” I don’t



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think RV failure is significant predictor of post LVAD mortality, because the authors have described that HR (95%CI) and p-value are 0.45 (0.09, 2.26) and 0.330, respectively. Therefore, I think the authors should substitute "RV failure (that) required RVAD support" for "RV failure".

2. Discussion, last page, first paragraph, lines 5 and 6 "In addition, age was not found to be an independent predictor of survival." Discussion, last page, third paragraph, lines 8-10 "whereas other significant variables, such as age, sex, etiology of heart failure, other comorbidities and reoperative cardiac surgery, do not appear to influence short and long term survival." The data about the relation of mortality to age, gender, and etiology of heart failure were nowhere to be founded. The authors should show the data in text and/or table 5. Please consider.

3. Tables 1-4 The authors should list unit about each continuous variables in Tables 1-4.

4. Table 1 I think the data lack accuracy. In particular, it is supposed that the data as regards to age, male gender, etiology of heart failure, and creatinine are wrong clearly. Problems than the above; Race, AA, BTT: Correct "42.4% (39/98)" to "39.8% (39/98)". Race, Caucasian, BTT: Correct "57.6% (53/98)" to "54.1% (53/98)". Race, Caucasian, DT: Correct "42.4% (47/102)" to "46.1% (47/102)". XCL Time, Total: Correct "71min \pm 30.6" to "71.0 \pm 30.6" Please consider.

5. Introduction, last sentence Correct "CF LAVD" to "CF LVAD".

6. Patient Data I think the authors should correct "liver function test" to "liver function test (LFTs)", because the authors described "LFTs" abruptly (Discussion, second paragraph, line 4).

7. Results, Preoperative patient demographics and operative characteristics, line 10 I think Impella (2/36, 6%) might be right. Sorry if I have got it wrong.

8. Results, Duration of support, heart transplant and survival rates, line 11 Correct "image 2" to "figure 2".

9. Discussion, first paragraph, line 4 Judging from abstract and figure 1, I think at 4 years 45% is right.



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<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Good presentation of important experience from one of the largest centers for LVAD implantation in the US. Interesting and important discussion. Only 2 main comments: 1) there are some errors in simple statistics (percentages), please check and correct. 2) There is no reference in the discussion to the experience of other major centers who perform LVAD implantation and comparison to the experience of others.