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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 28367

Title: Clinical characteristics and prognostic impact of atrial fibrillation in patients with chronic heart failure

Reviewer's code: 00227470

Reviewer's country: Netherlands

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 17:59

Date reviewed: 2016-07-03 03:15

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 checked="" 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 checked="" 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		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The authors investigated the correlation between AF and long-term all-cause mortality. I have several comments: 1. How did you assess atrial fibrillation? At first visit? Or do you mean permanent AF? The manuscript contains confusing information on this point. 2. How did you assess mortality? Was follow-up complete in all 903 patients? 3. Did you aim for rhythm control in this population? Were electrocardioversions done? Please comment and add to the analyses. 4. Please delete duplicate sentence in Methods: "This retrospective analysis board approval".



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 28367

Title: Clinical characteristics and prognostic impact of atrial fibrillation in patients with chronic heart failure

Reviewer's code: 00227654

Reviewer's country: United States

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 17:59

Date reviewed: 2016-07-13 21:36

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		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This interesting study by Gigli and colleagues examined the impact of atrial fibrillation on outcomes in patients with chronic heart failure. The authors conclude that AF did not have an independent impact on mortality, but beta blockade use appeared to affect this relationship. It would be useful to analyze the data separating HFpEf and HFfrEF patients. Effect of beta blockade would also be impacted by whether the patient has HFfrEF or HFpEF. It may be better to use LVEF of $\geq 50\%$ for diagnosis of HFpEF



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ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 28367

Title: Clinical characteristics and prognostic impact of atrial fibrillation in patients with chronic heart failure

Reviewer's code: 02446043

Reviewer's country: Malaysia

Science editor: Fang-Fang Ji

Date sent for review: 2016-07-01 17:59

Date reviewed: 2016-07-22 15:52

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> [Y] Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> [Y] Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> [] High priority for publication
<input type="checkbox"/> [Y] 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		[Y] No	<input type="checkbox"/> [] Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

A useful informative paper that should be accepted after authors addresses 2 matters. 1. In figure 3, comparison as presently shown is not logical. Comparison should be between like groups ie SRwBB vs AFwBB, SRwoBB vs AFwoBB, then SRwBB vs SRwoBB and AFwBB vs AFwoBB. 2. Table 2 has too many univariate/multivariate corrections and is very confusing to read. Authors should simplify the table and their message.