

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 30698

Title: Dysphagia after arteria lusoria dextra surgery: Anatomical considerations before redo-surgery

Reviewer's code: 00211908

Reviewer's country: Netherlands

Science editor: Fang-Fang Ji

Date sent for review: 2016-10-17 11:56

Date reviewed: 2016-10-28 13:22

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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 checked="" 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

Very interesting case report in a child with symptomatic congenital vascular anatomy. It conveys a clear message.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 30698

Title: Dysphagia after arteria lusoria dextra surgery: Anatomical considerations before redo-surgery

Reviewer's code: 00070411

Reviewer's country: China

Science editor: Fang-Fang Ji

Date sent for review: 2016-10-17 11:56

Date reviewed: 2016-11-03 11:59

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 checked="" 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

Arteria lusoria is the most common embryologic abnormality of the aortic arch. It is usually asymptomatic and fortuitously discovered. It can compress neighboring structures and cause dysphagia. In symptomatic cases or in the presence of an aneurysm of the arteria lusoria origin, it should be surgically treated. The authors present a case of persisting dysphagia symptoms after primary treatment via right-sided thoracotomy required redo-surgery via left-sided thoracotomy with transection of a persisting ligamentum arteriosum and shortening of the remaining lusorian arteries' stump. This case report has some significance for clinicians. However, the topic of the manuscript does not fit the scope of World Journal of Cardiology. If the authors could make a clear case how their study would fit the scope of the journal, they can always resubmit.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 30698

Title: Dysphagia after arteria lusoria dextra surgery: Anatomical considerations before redo-surgery

Reviewer's code: 00227375

Reviewer's country: Japan

Science editor: Fang-Fang Ji

Date sent for review: 2016-10-17 11:56

Date reviewed: 2016-11-05 16:18

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 checked="" 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 checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

This is a rare case report about a pediatric case of dysphagia attributed to an aberrant right subclavian artery that unexpectedly caused persisting symptoms after corrective surgery via right-sided thoracotomy. The authors suggest considering a median thoracotomy to address both contrary structural conditions and to effectively treat a right arteria lusoria in combination with a left ligamentum arteriosum at the same time. This manuscript is nicely structured and well written. I have several minor comments about this manuscript. Please consider the following comments. (Comments) 1. Page 3, Abstract, line 1 Correct "sublavian" to "subclavian". 2. Page 7, Discussion, line 1, Correct "a dysphagia we attributed to" to "a dysphagia attributed to"? Sorry if I have got it wrong. 3. References [3] Correct "Posaciogl H" to "Posacioglu H". [10] Correct "Van Son JAM, Naudin ten Cate L" to van Son JA, ten Cate LN". References should appear in the order in which they are first cited in the text.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 30698

Title: Dysphagia after arteria lusoria dextra surgery: Anatomical considerations before redo-surgery

Reviewer's code: 00211914

Reviewer's country: China

Science editor: Fang-Fang Ji

Date sent for review: 2016-10-17 11:56

Date reviewed: 2016-11-10 10:09

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"/> 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 article presented a pediatric case of dysphagia caused by an aberrant right subclavian artery. After an operative treatment via right-sided thoracotomy, the dysphagia was persistent. Then, a redo-surgery via left-sided thoracotomy with transection of a persisting ligamentum arteriosum and shortening of the remaining lusorian arteries' stump was performed, which resulted in complete recovery. The history was prescribed in detail and the two figures are nicely presented. I have following comments: 1. Authors reported an interesting case, which lead us to learn that there is a potential co-existence of the aberrant right subclavian artery and a ligamentum arteriosum. A good pre-operative plan may decrease the possibility of redo-surgery. 2. This article proposed a suggestion regarding the selecting of the diagnostic tool, i.e., authors suggested an age-dependent approach. Authors suggest echocardiography as the first-line tool for fetuses, newborns, and infants presenting the incidental findings of an arteria lusoria. However, for older children and adolescents, the first-line modality should be MRA. This suggestion is a very good recommendation in diagnosis of patients with different ages. 3. Authors also suggest the median thoracotomy instead of right- or



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left-sided thoracotomy because this approach can resolve both abnormalities. This recommendation is innovative and beneficial to the management to this kind patient.