

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 31034

Title: Paroxysmal Atrial Fibrillation Ablation: Achieving Permanent Pulmonary Vein Isolation.

Reviewer's code: 00227470

Reviewer's country: Netherlands

Science editor: Shui Qiu

Date sent for review: 2016-11-02 11:07

Date reviewed: 2016-11-06 05:24

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" 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"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

Thank you for writing this clear and in depth review article. My only comment would be that this review is on RF ablation, please add this to the title of the manuscript.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 31034

Title: Paroxysmal Atrial Fibrillation Ablation: Achieving Permanent Pulmonary Vein Isolation.

Reviewer's code: 03494132

Reviewer's country: Italy

Science editor: Shui Qiu

Date sent for review: 2016-11-02 11:07

Date reviewed: 2016-11-11 03:29

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

The Authors describe in this review how to achieve a persistent Pulmonary Vein Isolation in the treatment of Paroxysmal Atrial Fibrillation. Although the manuscript is well written, I have 2 main drawbacks greatly limiting the generalizability of the review: - The use of irrigated catheters represents common clinical practice when ablating in the left atrium, so I suggest to trim that part focusing more on the use of contact force catheters and pacing maneuvers in order to prove electrical isolation and Adenosine testing to confirm it. - Usually the purpose of a review is to cover the complete knowledge regarding the main subject, trying to achieve completeness when addressing an important issue, as it is the case. After STAR AF trial, PVI has achieved a more relevant position in the treatment of AF, also in the treatment of persistent AF. However, in the era of 'one shot devices' (i.e. balloon guided technology or single application RF devices), isolation persistency can be achieved not only with RF focal catheters. A review regarding this issue cannot be considered complete if it is not dealing with such technology. In addition, a word of caution has to be spent when talking about clinical arrhythmia recurrences after PVI. There is a certain amount of patients



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not experiencing AF recurrences after PVI although they present a PV reconnection, whereas paroxysmal patients may have clinical AF with all the PVs still isolated. The future has to be focused on the identification of each patient specific mechanism (drivers, rotors, focal activity, etc..) since some patient may show a non PV trigger and still experiencing paroxysms. In such cases, fortunately a minority, the sole PVI may not be enough. A final comment from the Author would be appropriate and well accepted for the readers of the Journal.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

ESPS manuscript NO: 31034

Title: Paroxysmal Atrial Fibrillation Ablation: Achieving Permanent Pulmonary Vein Isolation.

Reviewer's code: 03580100

Reviewer's country: Singapore

Science editor: Shui Qiu

Date sent for review: 2016-11-02 11:07

Date reviewed: 2016-11-21 18:12

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 checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	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

With small corrections this atrial fibrillation is good and I think worth publishing.