

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Neurology

**ESPS Manuscript NO:** 3446

**Title:** Relevance of Long QT Syndrome in Clinical Neurology

**Reviewer code:** 00113121

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-02 17:37

**Date reviewed:** 2013-05-03 20:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" 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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

The authors present a well conducted and scientifically interesting systematic brief review on relevance of long QT syndrome in clinical neurology. The study is potentially interesting but can be improved if the following minor considerations are addressed: 1. Authors should consider to add a new section in the review referred to "variation of QT interval in acute stroke". 2. It would be interesting to include a comment regarding that in-hospital mortality rate in acute stroke was 16.3% and sudden death was a non-neurological cause of death in a clinical series (Cerebrovasc Dis 1996; 6: 161-5) and that cerebral arrhythmogenesis (including long QT interval) may underlie sudden death in ischemic or hemorrhagic stroke (Arch Neurol 1990; 47: 513-9; West J Emerg Med 2011; 12: 414-20). 3. It would be helpful to mention that in-hospital mortality rate on cardioembolic stroke remain around 20% and cardioembolic stroke is the subtype of ischemic infarct with the highest in-hospital mortality. The short-term prognosis of patients with cardioembolic stroke is poor in comparison with other ischemic stroke subtypes (Curr Cardiol Rev 2010; 6: 150-161).

## ESPS Peer-review Report

**Name of Journal:** World Journal of Neurology

**ESPS Manuscript NO:** 3446

**Title:** Relevance of Long QT Syndrome in Clinical Neurology

**Reviewer code:** 00646681

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-02 17:37

**Date reviewed:** 2013-05-06 23:15

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Unger and Fassbender concisely reviewed the most frequently used ways to analyze the QT interval in patients with long QT syndrome (LQTS), and neuroleptic drugs that could cause LQTS. This is a very short, simple review that could potentially benefit clinical neurologists. Only minor points: Page 3, line13, neurolopetic should be neuroleptic. Please spell out ECG in page 4, the second line from the bottom.

## ESPS Peer-review Report

**Name of Journal:** World Journal of Neurology

**ESPS Manuscript NO:** 3446

**Title:** Relevance of Long QT Syndrome in Clinical Neurology

**Reviewer code:** 00646445

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-02 17:37

**Date reviewed:** 2013-05-07 17:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

## COMMENTS TO AUTHORS

The topic of this review is of interest and worth attention for clinical neurology, although in this review only few new points are added also because the authors revised a very limited numbers of studies. Furthermore, LQTS is a already well-known to neurologists. In this view, a more detailed and complete review of all drugs influencing LQTS could be highly appreciated. More generally, this review lacks of systematic approach to the literature. This approach to the all available experimental evidences on the interaction between CNS-drugs and LQTS would provide useful clinical guidelines. Specific comments on the manuscript are following: - The title reflects the topic of this study. Indeed, I suggest to insert in the abstract the aim of this study. - Materials and methods are not described. I suggest to explain the search strategy applied. - References are poor. - It would be interesting to include new sections on other neurological diseases. - A table summarizing the all drugs could help. - English should be reviewed

## ESPS Peer-review Report

**Name of Journal:** World Journal of Neurology

**ESPS Manuscript NO:** 3446

**Title:** Relevance of Long QT Syndrome in Clinical Neurology

**Reviewer code:** 00646655

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-02 17:37

**Date reviewed:** 2013-05-15 01:17

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	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"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

## COMMENTS TO AUTHORS

Comments to authors: The manuscript (Relevance of Long QT Syndrome in Clinical Neurology by Unger et al) reviewed the pathophysiology, clinical features and the neurological relevance of long QT syndrome (LQTS). The manuscript is well organized and concisely written. Comments: 1. The introduction part of LQTS needs to be expanded. The genetics of congenital and acquired LQTS should be discussed. In addition, the clinical presentations of LQTS should include more related information of neurological symptoms. So a more thorough literature review is recommended here. (For example, Frank et al, The prolonged Q-T syndrome presenting as a focal neurological lesion Surgical Neurology 1981) 2. The manuscript described several CNS-active drugs which could prolong the QT interval and potentially induce the LQTS. However, the mechanisms responsible for such changes are not introduced. 3. The relationship of seizure and LQTS was discussed in details in the manuscript. The diagnosis (Gospe et al Electroencephalography laboratory diagnosis of prolonged QT. interval Annals of Neurology 1990) and pathology (Johnson et al, Identification of a possible pathogenic link between congenital long QT syndrome and epilepsy. Neurology 2009) should be included. 4. Finally, differential diagnosis and the managements for LQTS related neurological disorders need to be discussed in details.

**ESPS Peer-review Report**

**Name of Journal:** World Journal of Neurology

**ESPS Manuscript NO:** 3446

**Title:** Relevance of Long QT Syndrome in Clinical Neurology

**Reviewer code:** 00476235

**Science editor:** Zhai, Huan-Huan

**Date sent for review:** 2013-05-02 17:37

**Date reviewed:** 2013-07-25 06:19

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<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"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

**COMMENTS TO AUTHORS**

In my opinion, the article is suitable for publication.