

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Neurology

ESPS manuscript NO: 16120

Title: Thrombolysis for Mild Stroke

Reviewer's code: 00646412

Reviewer's country: Hungary

Science editor: Fang-Fang Ji

Date sent for review: 2014-12-29 09:37

Date reviewed: 2014-12-31 01:58

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 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"/> 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

The authors address a practically very important issue in their review: should we or should not we apply rtPA treatment in those with mild stroke. The authors correctly address the important aspects of this problem and suggest practical approach for decision on one hand, and also recommend directions of further studies. The authors suggest that more severe signs, large vessel occlusion and large affected areas on imaging are associated with worse later outcome, therefore it probably would be worth to introduce thrombolysis even if the initial signs are mild in such cases. The reference list should be put to the right format. Please check especially references No 3, 7, 15, 19, 21, 25, 26, 31. Conference abstracts should be referred to also by the appropriate page number of the abstract book; previously in press papers several years before should be updated with the page numbers after publication, and please be consistent with the use of journal names in the reference list (now it is full journal name at some places whereas abbreviated titles at others).

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Neurology

ESPS manuscript NO: 16120

Title: Thrombolysis for Mild Stroke

Reviewer's code: 00646439

Reviewer's country: Italy

Science editor: Fang-Fang Ji

Date sent for review: 2014-12-29 09:37

Date reviewed: 2015-01-07 20:44

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 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 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

The Authors present a review paper on the topic of mild stroke definition and its implication for acute treatment. The topic is of interest. As regards methodology, the review is not evidence based and the Authors continuously remind the need for well-designed clinical trials to answer the questions raised from the manuscript. The Authors propose a well-constructed clinical reasoning to determine which patients could benefit from thrombolysis, and this literature-based hypothesis might represents the ideal starting point for future clinical trials. References are adequate and up-dated.