

Review Form 1.7

Journal Name:	Asian Journal of Cardiology Research
Manuscript Number:	Ms_AJCR_102286
Title of the Manuscript:	Chronic total occlusion of coronary left main artery supplied by right collaterals under vascular endothelial growth factor inhibitor therapy : a rare case report
Type of the Article	Case report

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<https://www.journalajcr.com/index.php/AJCR/editorial-policy>)

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
<p>Compulsory REVISION comments</p> <p>1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript)</p> <p>2. Is the title of the article suitable? (If not please suggest an alternative title)</p> <p>3. Is the abstract of the article comprehensive?</p> <p>4. Are subsections and structure of the manuscript appropriate?</p> <p>5. Do you think the manuscript is scientifically correct?</p> <p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p>	<p>1. Yes 2. No 3. Yes 4. Yes 5. No</p> <p>This reviewer think that this case report is interesting and highlight the importance of onco-cardiology. However, he has to provide some comments to the authors to improve their manuscript.</p> <p>Major comments: In abstract</p> <p>1. We report a rare case of a patient who despite being under anti VEGF : Bevacizumab , developed a large coronary collateral circulation completely supplying the chronic total occlusion of left main coronary artery →If the authors want to describe this sentence, they have to show the coronary angiogram before the start of cancer therapy.</p> <p>2. Regarding this topic, the authors are expected to show the reference which revealed that bevacizumab inhibit the collateral circulation of occluded coronary arteries. If there is no reference , the authors should not use “rare” case.</p> <p>3. Please add the references for the following sentence. In introduction</p> <p>1. Angiogenesis inhibitors either selectively neutralize VEGF (antibodies) or inhibit its receptors (tyrosine kinase inhibitors).</p> <p>2. Therefore, all angiogenesis inhibitors such as bevacizumab have cardiovascular adverse effects, including hypertension, thromboembolism and in some circumstances also myocardial dysfunction.</p> <p>In discussion Other important cardiovascular adverse events of bevacizumab include arterial and venous thrombotic events, coronary artery disease and heart failure resulting from inhibition of endothelial regeneration.</p> <p>4. In discussion the incidence of coronary syndromes was 1.5% in the bevacizumab group and 1% in the control group [4].→this difference is significant or non-significant?</p> <p>5. Please show the ECG and UCG on the last cardiac examination but before symptom onset. How many days passed since last cardiac examination since symptom occurred for the first time. Namely, I think it is not unclear when the LMT completely occluded. There might be a possibility that LMT CTO had already existed before the cancer treatment and the collaterals lost function or partially occluded due to treatment with bevacizumab. This discussion would be necessary.</p>	
<p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p>	<p>1. No</p> <p>1. In abstract and main manuscript: a patient who despite→a patient who, despite</p> <p>2. In abstract: Line 5 (VEGF)-A→(VEGF)-A. Please show the full spelling of A.</p> <p>3. In Figure 2: with impairment of regional systolic contractility interesting apical and anterior segments associated with an intense intracavitary contrast →What does interesting mean in this sentence?</p> <p>4. In case report: based on Angiotensin-converting enzyme (ACE) inhibitors and betablockers. Angiotensin→angiotensin</p> <p>5. In discussion: in it's functions→in its function?</p>	

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	6. while an excessive amount of it may push AS plaques to an unstable state.[6] →Please show abbreviations at the first presentation for AS.	
Optional/General comments		

PART 2:

	Reviewer's comment	Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

Reviewer Details:

Name:	Shigenori Ito
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