

## Review Form 1.7

Journal Name:	Asian Journal of Cardiology Research
Manuscript Number:	Ms_AJCR_110435
Title of the Manuscript:	Demographic and Clinical Profile of Patients with Acute ST-elevation Myocardial Infarction
Type of the Article	Original Research Article

### 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><b>Compulsory</b> REVISION comments</p> <p>1. <b>Is the manuscript important for scientific community?</b> (Please write few sentences on this manuscript)</p> <p>2. <b>Is the title of the article suitable?</b> (If not please suggest an alternative title)</p> <p>3. <b>Is the abstract of the article comprehensive?</b></p> <p>4. <b>Are subsections and structure of the manuscript appropriate?</b></p> <p>5. <b>Do you think the manuscript is scientifically correct?</b></p> <p>6. <b>Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</b></p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p>	<p>1. This manuscript examining the demographic and clinical profiles of patients with acute ST-elevation myocardial infarction (STEMI) provides valuable real-world data. The relatively large sample size (N=100) and inclusion of details on symptoms, clinical findings, risk factors, and outcomes offer insights that can inform clinical practice and future research. However, the single-centre design may limit generalizability. Overall, this study makes a modest but meaningful contribution to the literature on STEMI patients.</p> <p>2. The title "Demographic and Clinical Profile of Patients with Acute ST-elevation Myocardial Infarction" clearly conveys the main focus of the study. I think it is appropriate and does not need changing.</p> <p>3. Yes, the abstract clearly summarizes all the key sections - background, aims, methods, results, and conclusions. It highlights the main findings on the demographic and clinical characteristics of STEMI patients. Overall, it provides a good overview of the study.</p> <p>4. Yes, the structure and organization of the manuscript are appropriate. It follows the standard IMRaD format (Introduction, Methods, Results, and Discussion) used in scientific writing. The use of tables and figures to present data is also fitting.</p> <p>5. From my assessment, the study design, methodology, analysis, and interpretation of the results seem scientifically sound. No obvious flaws were noted. As an observational single-centre study, it has limitations regarding generalizability but appears correctly conducted based on the details provided.</p> <p>6. The number of references seems reasonable for a study of this scope. Most cited works are recent, published within the last 15-20 years, with a few older but likely still relevant sources. Additional relevant references that could be considered:</p> <ul style="list-style-type: none"> <li>Contemporary reviews/guidelines on STEMI management from cardiology societies (e.g. ACC, ESC).</li> <li>Epidemiological studies on STEMI incidence and outcomes from low/middle income countries.</li> </ul>	
<p><b>Minor</b> REVISION comments</p> <p>1. <b>Is language/English quality of the article suitable for scholarly communications?</b></p>	<p>Yes, the language and style used are appropriate for a medical/scientific journal. Terminology and descriptions are technical yet clear. Grammar, syntax, etc. are at an acceptable level. Further proofreading could polish the writing, but it is adequate overall.</p>	
<p><b>Optional/General</b> comments</p>		

### PART 2:

	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)

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<b>Are there ethical issues in this manuscript?</b>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	
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