

Review Form 1.7

Journal Name:	Asian Journal of Cardiology Research
Manuscript Number:	Ms_AJCR_99423
Title of the Manuscript:	Incidence and Characteristics of Postoperative Atrial Fibrillation in Sudanese Patients Undergoing Heart Valve Surgery: A Descriptive Retrospective Study
Type of the Article	Original Research Article

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>)

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>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</p>	<p>1. Postoperative atrial fibrillation increases the rate of postoperative mortality and leads to complications such as postoperative stroke, hemodynamic compromise, and prolonged length of hospital stay; hence the manuscript is important for scientific community.</p> <p>2. Title of the article is suitable.</p> <p>3. The abstract of the article is comprehensive.</p> <p>4. The subsections and structure of the manuscript are appropriate.</p> <p>5. Previous studies have demonstrated that, a larger left atrial volume was associated with a higher risk of atrial fibrillation in older patients. Left atrial diameter ≥ 50 mm should be considered an indicator of marked left atrial enlargement. Left atrial size should be integrated into the decision-making process of patients with mitral valve disease (mostly mitral regurgitation) and that surgery may be considered earlier during the disease^{1,2}.</p> <p>6. References –</p> <ol style="list-style-type: none"> 1. Tsang TS, Barnes ME et al. Left atrial volume: important risk marker of incident atrial fibrillation in 1655 older men and women. Mayo Clin Proc. 2001 May;76(5):467-75. doi: 10.4065/76.5.467. PMID: 11357793. 2. Steven J. Kernis, Vuyisile T. Nkomo et al. Atrial Fibrillation After Surgical Correction of Mitral Regurgitation in Sinus Rhythm Incidence, Outcome, and Determinants, Circulation Vol. 110, Issue 16, 19 October 2004; Pages 2320-2325 	
<p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p>	Language/English quality of the article is suitable for scholarly communications.	
<p>Optional/General 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)
<p>Are there ethical issues in this manuscript?</p>	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

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