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Heart Function and Ventricular Recovery After Percutaneous Closure of Perimembranous Ventricular Septal Defect in Children: A Cross-sectional Study

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

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1 Original submission

1 comment · 3 Oct 2021

Mohammad Taghi Majnoon Reviewer

MINOR REVISION 3 Oct 2021

Hello,
Thanks for inviting me to review the article.
The study was retrospective, and the echocardiography was most probably performed by different people.
When echocardiography is performed by different people, its reliability is in question.
The other problem is the low number of cases.
A long-term prospective evaluation could be fantastic.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Editor in chief,

We, the authors highly appreciate your review on our manuscript and would like to express our gratitude towards the reviewers for their valuable comments. We revised the manuscript according to the reviewers' comments. The changes are highlighted in yellow in this letter as well as the manuscript.

Reviewer 1:

- The article was retrospective and most probably different persons had made thee Echocardiography.

In different hands, the reliability is under question.

The data at the time of VSD closure were collected from the patients' chart, but **the same pediatric cardiologist** did all follow-up echocardiography and this was mentioned in the manuscript.

- The other problem is the low number of cases. A long term perspective evaluation could be a fantastic one.

The mentioned suggestion was added to the limitation of the study.

Reviewer 2:

thanks dear Authors for submit article with titles:"Heart function and ventricular recovery after percutaneous closure of peri-membranous ventricular septal defect in children: a cross-sectional study".hear is some point that should be considered :

-it is better to not use abbreviations in abstract.

The abbreviations were omitted from the abstract.

-there are some confusing data in your article that is should be noted,i guess that most finding that you achieved in your study is due to disynchronous function of ventricle probably as result of RBBB or ventricular conduction abnormality results to abnormal echocardiography parameters ,other scenario is Tricuspid regurgitation leads to change of RV echocardiography parameters .please explain more about the mentioned issues,you should convinced reader completely why after VSD closure these parameters not return to normal limit.

The exclusion criteria for this study were clarified and the following paragraph was added to the Materials and Methods: "Patients with a residual shunt, QP/QS more than 1.5, any periprocedural complications, any conduction abnormalities (right bundle branch block, left bundle branch block, or heart block, left ventricular dilation, and those with more than mild valvular regurgitation were excluded from the study."

-your table is boring not interesting for reader,please summerised as 2-3 practical tables

Tables 2 and 3 were combine and shown as the new "Table 2". Tables 4, 5 and 6 also combined and expressed as the new "Table 3" in order to decrease number of tables to 3 practical ones.

-with considering study with 10 years duration i expect more sample volumes for study.

According to the sample size estimation for evaluation, 40 patients were reasonable and acceptable for the present analysis. However more extensive prospective study is beneficial, and this comment was also added to the limitations of the study.

We also re-drew the "Figure1" to make it more attractive and understandable.

Sincerely,

A.A.

2 Revision 1

0 comments

No public comments in this round.