

## Review Form 1.6

Journal Name:	<a href="#">Journal of Pharmaceutical Research International</a>
Manuscript Number:	Ms_JPRI_83922
Title of the Manuscript:	PREVALENCE OF EARLY SUBACUTE STENT THROMBOSIS AFTER PRIMARY PCI IN STEMI PATIENTS
Type of the Article	Original 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.journaljpri.com/index.php/JPRI/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)
<b>Compulsory</b> REVISION comments	<p>The manuscript with the title “Prevalence of early subacute stent thrombosis after primary PCI in STEMI patients” addresses an interesting topic, highly debated by the doctors activating in the field of interventional cardiology. There are many contributors to early stent thrombosis therefore the purpose of the study - to provide clear data on this issue - is of great relevance and interest.</p> <p>In order for this manuscript to contribute to medical research, it must be majorly revised.</p> <p>1. The Introduction must be substantially revised. The introduction must be a critical analysis of the knowledge in the field published so far, not just a series of data of some studies, possible subjectively chosen by the author. The introduction should provide solid and comprehensive information on modern theories of intrastent thrombosis early after PCI.</p> <p>2. Method section: The inclusion criteria must be clarified. It is stated that the included patients were those admitted for primary percutaneous coronary intervention. Of note, high-risk NSTEMI patients may undergo primary PCI. From the manuscript it can be deduced that the patients included in the study are STEMI, but it must be clear in the inclusion criteria also.</p> <p>3. The definition of stent thrombosis after PCI includes acute, subacute, late and very-late stent thrombosis. Why “early subacute stent thrombosis”? The author states that patients were observed for 24 hours after PCI, so the study is about acute stent thrombosis, not about subacute!</p> <p>4. Height and weight are not important as isolated parameters. The BMI is important. Height and weight should remain only in the table.</p> <p>5. The antithrombotic treatment is of vital importance for preventing stent thrombosis. In the manuscript these data are marginally presented. In should be very clearly mentioned the antiplatelet treatment before PCI, the anticoagulant drug used during PCI and the antithrombotic treatment after PCI.</p> <p>6. The statement "Early sub-acute stent thrombosis was found 49.2% in antithrombotic therapy and 2.8% in non-antithrombotic therapy during PCI which shows a highly significant association between antithrombotic therapy and early sub-acute stent thrombosis i.e." must be checked very carefully because it contradicts all current knowledge. Beyond the very high incidence of intrastent thrombosis in the first 24 hours after the procedure, the author's statement concludes that thrombosis is more common in patients receiving antithrombotic treatment than in those who do not receive antithrombotic treatment. It should be the other way around.</p> <p>7. The discussions are superficial and unconvincing.</p> <p>8. The "study limitation" section should be added.</p> <p>9. Intensive English revision is mandatory.</p> <p>I recommend fixing all the issues highlighted, followed by another round of evaluation by the reviewers.</p> <p>Thank you!</p>	<p>1. Introduction has been revised according to the suggestions.</p> <p>2. The patients of age 25 to 75 with ST-elevation myocardial infarction subjected to percutaneous coronary interventions were included in this study. These details are mentioned and now highlighted in the manuscript.</p> <p>3. In all the manuscript, the term “early subacute stent thrombosis” is replaced with “acute stent thrombosis” as the patients were observed for 24 hours after PCI.</p> <p>4. Height and weight stratitification has been cut from the results, however, its data is indicated only in table.</p> <p>5. Standard antithrombotic treatment was given to the patients. It is mentioned in methodology section.</p> <p>6. The mistake has been corrected</p> <p>7. It has been revised</p> <p>8. Study limitation has been added</p> <p>9. English has been revised</p> <p>All the changes are now highlighted in yellow.</p>
<b>Minor</b> REVISION comments		

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<b>Optional/General</b> comments		
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**PART 2:**

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