

Review Form 1.6

Journal Name:	Cardiology and Angiology: An International Journal
Manuscript Number:	Ms_CA_81089
Title of the Manuscript:	Assessment of functional mitral regurgitation Severity by proximal isovelocity surface area using three-dimensional transthoracic echocardiography
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.journalca.com/index.php/CA/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)
<u>Compulsory</u> REVISION comments	<p>The theme approached by the authors is interesting, once MR and its severity is some of the most prevalent findings in TTE, in cardiology practice. The authors suggest that the 3D TTE is superior when compared to the 2D technique to measure MR severity. Although the importance of the article, there are some tips that may be considered by the authors:</p> <ol style="list-style-type: none">1. Many English mistakes. I suggest a complete language review.2. Confuse and unformal language constructions. I suggest a deep change in the text structure.3. There are some parts, where the information is not clear, periods are too long. For example: “Mitral inflow and aortic outflow were calculated as the time velocity integral of the mitral or aortic inflow multiplied by the cross-sectional area of the mitral annulus ($2 \pi a b$) or aortic annulus ($2 \pi r^2$), where a is the mitral annular dimension in the four-chamber view, b is the mitral annular dimension in the apical two-chamber view, and r is the left ventricular outflow tract diameter in the parasternal long-axis view”4. Structure used in “results” is not recommended for articles, once there a lot of topics, instead of a text.5. Redundant constructions. For example: “Exclusion criteria: Patients with previous mitral valve surgery or concomitant mitral valve stenosis and poor image quality for TTE were excluded.”6. The references that were chosen, especially in the introduction, are a quite old. I suggest a deeper review to look for more recent ones.	
<u>Minor</u> REVISION comments	<p>The content is good, and the theme is interesting. However, some deep changes in the text construction and in the use of the language are required.</p>	
<u>Optional/General</u> comments	<p>The content is good, and the theme is interesting. However, some deep changes in the text construction and in the use of the language are required.</p>	

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

Reviewer Details:

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