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| Journal Name: Asian Journal of Cardiology Research  | **[Asian Journal of Cardiology Research](https://journalajcr.com/index.php/AJCR)** |
| Manuscript Number:**Ms\_AJCR\_137785** | **Ms\_AJCR\_137785** |
| Title of the Manuscript:  | **Advances in the Management of Acute Limb Ischemia: A Comprehensive Review of Current Strategies and Techniques** |
| Type of the Article: Peer reviewed |  |

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| PART 1: Comments |
|  | Reviewer’s comment**Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | **Author’s Feedback** (It is mandatory that authors should write his/her feedback here) |
| **Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.** | Manuscript might be well titled describing the comparative modalities of management protocols of Acute limb ischaemia in accordance to different recent guidelines. Acute limb ischaemia is consequences required urgent attention and plays a pivotal role for limb salvage as well as saving a life. Its deadly consequences, if overlooked, may cause a devastating result. Early diagnosis and prompt management skill is very necessary in accordance to recent updates and guidelines. |  |
| **Is the title of the article suitable?****(If not please suggest an alternative title)** | It is better to use the term “ Different Modalities of Treatment in Acute limb ischaemia : A Comprehensive Review of Current Strategies and Techniques”Advancement of different modalities are discussed here. So as it is already advanced in all modalities, better to avoid the “Advances” jargon. |  |
| Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here. | Abstract should focus the issue in a concised manner that attracts the readers. It actually discusses the types of different treatment protocols of acute limb ischaemia. So surgical embolectomy or, endovascular thrombolysis/ embolectomy should be prioritised rather than any bypass procedure. Surgical bypass or, endovascular stenting / ballooning may be considered after treating acute conditions and proper evaluation. Severe deadly limb may require and potentiate necessity of urgent amputation. |  |
| Is the manuscript scientifically, correct? Please write here. | As the manuscript discusses the different modalities of Acute limb ischaemia, priority should be given to the urgent surgical/ endovascular measures for timely limb salvage accordingly. Bypass or, Endovascular stenting is a time consuming and subjected to the availability of treatment options in many peripheral centres. Acute ischaemia always requires prompt management for the limb salvage as well as for saving a precious life!I think, Surgical bypass or stenting is better to preserve for CLI. |  |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.** | Recent reference should be added from recent guidelines and publications. I think, here references should be within 20. |  |
| Is the language/English quality of the article suitable for scholarly communications? | Language skill is matured |  |
| Optional/General comments | Prioritized the treatment protocols according to SVS and ESVS recent guidelines in case of Acute limb ischaemia guidelines.Consent part may be omitted as it is a discussion of different strategic treatment protocols depending on publications and guidelines. |  |

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| **PART 2:**  |
|  | **Reviewer’s comment** | **Author’s Feedback** (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:**

**Md. Moynul Islam, National Institute of Cardiovascular Diseases and Hospital, Bangladesh**