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| Journal Name: | **[Asian Journal of Cardiology Research](https://journalajcr.com/index.php/AJCR)** |
| Manuscript Number: | **Ms\_AJCR\_139525** |
| Title of the Manuscript: | **BUNDLE BRANCH BLOCK PATTERNS AND LONG-TERM OUTCOMES IN HEART FAILURE** |
| Type of the Article |  |

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| PART 1: Comments | | |
|  | Reviewer’s comment **Artificial Intelligence (AI) generated or assisted review comments are strictly prohibited during peer review.** | **Not AI generated** |
| **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.** | This manuscript addresses an important clinical question regarding the prognostic value of bundle branch block (BBB) patterns, especially left bundle branch block (LBBB) and right bundle branch block (RBBB), in patients hospitalized with heart failure (HF). Considering the increasing prevalence of HF globally and the limited data on how conduction abnormalities influence long-term outcomes, this study contributes valuable real-world evidence. The findings that LBBB is associated with worse outcomes, while RBBB is not, can influence clinical decision-making and may guide more targeted interventions such as cardiac resynchronization therapy (CRT). This manuscript thus enhances understanding of electrophysiological markers in HF prognosis and can help refine risk stratification. | The study highlights the importance of cases of hear failure, where vigorous and guideline based approach, results in desired outcomes. Procedures like CRT-D in LBBB with reduced ejection fraction cases, resulted in favourable outcomes and mortality reduction. Patients who received all four pillars of heart failure benefitted the most in all with heart failure |
| **Is the title of the article suitable?**  **(If not please suggest an alternative title)** | The title is clear and appropriately reflects the manuscript’s content. However, a slightly more precise alternative could be: **“Bundle Branch Block Patterns and Their Impact on Long-Term Outcomes in Hospitalized Heart Failure Patients”**. This clarifies that the study population is hospitalized patients and emphasizes outcomes. | YES |
| 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. | The abstract is well-structured and summarizes key points effectively. However, it could benefit from including more explicit information on sample size and key statistical findings (e.g., specific p-values or hazard ratios if available). The conclusion could be strengthened by explicitly mentioning clinical implications or recommendations. For clarity, consider briefly mentioning the follow-up duration and that the study was prospective. No deletions necessary. | YES, comprehensive |
| Is the manuscript scientifically, correct? Please write here. | Overall, the manuscript is scientifically sound, with appropriate methodology and statistical analysis described. The inclusion and exclusion criteria are clearly stated, and the results logically support the conclusions. Some minor issues to consider: (1) Clarify how missing data, if any, were handled. (2) Provide more details on follow-up duration and outcome assessment timelines. (3) Discussion could better contextualize how this study adds to conflicting literature on RBBB prognostic value. | YES |
| **Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.** | The references cover foundational and recent literature relevant to HF and BBB. Most citations appear current up to 2023, which is commendable. Consider adding a few more recent large registry studies or meta-analyses on CRT outcomes in LBBB patients and recent guidelines on HF management from the ESC or AHA (2021-2024) to strengthen clinical context. | YES |
| Is the language/English quality of the article suitable for scholarly communications? | The manuscript is generally well-written and clear, suitable for scientific communication. Some sentences could be streamlined for better flow and readability. Minor grammatical edits and tightening of phrasing would enhance clarity (e.g., consistent use of tenses, avoiding redundant phrases). A professional language edit is recommended prior to publication. | YES |

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| Optional/General comments | The study’s strength lies in its prospective design and comprehensive analysis of clinical, echocardiographic, and biochemical parameters. Adding a table summarizing baseline characteristics stratified by BBB status (LBBB, RBBB, no BBB) would improve clarity. Figures should be embedded with captions in the manuscript for easier interpretation. Future directions could also mention exploring device therapy efficacy stratified by BBB subtype. Overall, this is a valuable contribution to HF literature.  **General Comments**  The manuscript is scientifically sound with relevant findings and generally well-structured. Minor revisions are recommended, mainly language polishing, clarifications in methodology, and improved integration of figures and tables to enhance readability and impact. These improvements will make the manuscript suitable for publication. | NIL |

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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)* | no |