



SDI Review Form 1.6

Journal Name:	Journal of Cancer and Tumor International
Manuscript Number:	Ms_JCTI_19169
Title of the Manuscript:	Evaluation of cardiac biomarkers in detection of cardiomyopathy induced by cardiotoxic chemotherapeutic agents
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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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)
<u>Compulsory</u> REVISION comments	1. Rationale to focus on pro-brain natriuretic peptide (NT-PROBNP) was not introduced in clear. 2. It has been observed for a while (from 1997) but reports regarding this peptide in cardiac damage are so less. Why? 3. Please add the number of ethics committee. 4. In Table 2, values are obtained from each assay running once only or what? It will be better to show the value of each indicator but not the percentage. 5. In Table 2, baseline showed 6 patients belonged to positive of this indicator. Why? 6. Changes of this indicator seem not related with CK-MB and/or cTnI. Why? 7. Correlation between ECHO data and this indicator shall be supplied.	1. Done 2. Probably it was not investigated in proper way. With this observation actually we have started this work. 3. Done 4. We have obtained the value once only. It is not possible to give individual value of all the indicators in tabulated form. So we have presented the data in percentage. 5. It was just an observational study. We have checked the base line value and it was positive for NT-Pro BNP, but not for other indicators. It probably due to non specific rise. Level may rise due to several causes like; anemia, sleep apnea etc. [vide: Januzzi et al, Potential Causes of NT-proBNP Elevation - Am J Cardiol (2008) 101: 29A-38A] 6. Probably Nt pro BNP is more sensitive than other indicators. 7. Supplied
<u>Minor</u> REVISION comments	In discussion, ANT was used to instead of chemotherapy without indication at first time. In conclusion, no evidence showed this indicator is better than CK-MB.	Done Corrected
<u>Optional/General</u> comments	The target of this peptide as new indicator is suitable. But the data failed to support hypothesis. It shall be revised carefully.	Done