Reviewer's report

Title: A successfully thrombolysed acute inferior myocardial infarction due to type A aortic dissection with lethal consequences: the importance of early echocardiography.

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Reviewer: Vassilios VD Didilis

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The paper of Grigorios Tsigkas et al, is a case report about a coronary malperfusion syndrome due to type A aortic dissection. This is not an uncommon complication of the aortic dissection (5-10%), a fact which both the cardiologist and the cardiac surgeon must keep in mind. Alerting them to this possibility and to the necessity of the bedside TTE prior to any therapy of coronary syndromes, should be the aim of this paper.

From this point of view, I found that this case report is somewhat extended, giving information which one could take from other sources. (e.g. details of the operation, Stanford classification etc)

I think the authors should shorten the text and limit it to the preoperative findings, the final diagnosis, the art of the performed operation, and the patients’ outcome.

In the Discussion, the importance of the bedside TTE, especially when other examinations have not proved effective in the diagnosis of this serious clinical entity, should be emphasized.

However, if the mechanism of coronary malperfusion in acute aortic dissection and the management of this were to be discussed, the following articles could be of a great assistance.


Concerning the figures, I think that No. 1-4 could be excluded, since what they display is sufficiently described in the text. In figures No. 7 and 8 (photos) the exact pathologoanatomical findings cannot be clearly identified.

Level of interest: An article of importance in its field

Quality of written English: Acceptable
Declaration of competing interests:

I declare that I have no competing interests.