Reviewer's report

Title: Epicardial unipolar radiofrequency ablation for left ventricular aneurysm related ventricular arrhythmia

Version: 1 Date: 28 March 2013

Reviewer: Stefano Benussi

Reviewer's report:

Comments to the authors:
Yu et. al. report on a patient with three vessel disease and left ventricular aneurysm associated with polymorphic ventricular tachycardia. Left ejection fraction was 0.40 and normal LV diameter (55mm). Concomitantly to an off-pump coronary revascularization, the authors have treated the left ventricular aneurysm with a linear excision and epicardial unipolar radiofrequency ablation around the aneurysm. The ablation has been guided by reference electrocardiogram positioned in right ventricle, confirming only epicardial localization. Final outcome by symptoms control is remarkable (no anti-arrhythmic drugs, better functional status when compared to baseline; symptoms and no response in operating room to endovenous isoprenaline in terms of ventricular arrhythmia).

- The case is clear and well written. This notwithstanding, the Electrophysiological outcome should be detailed more precisely, at least based on rhythm monitoring: when and how many times (just one?) was a Holter done during follow-up?

- Please discuss more in deep the potential role of left ventricle remodelling by means linear exclusion of the aneurysm, which could, per sé, reduce the arrhythmia burden even without concomitant ablation. A post ablation intraoperative EP control before surgical exclusion of the aneurysm would have provided stronger evidence of the efficacy of ventricular HIFU.

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Declaration of competing interests:
I declare that I have no competing interests