Reviewer's report

Title: Right axillary and femoral artery perfusion with mild hypothermia for aortic arch replacement

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Reviewer: Davide Pacini

Reviewer's report:

I read with interest the paper by Guo et al. They reported their experience in the treatment of acute type A aortic dissection with mild hypothermia, antegrade selective cerebral perfusion and retrograde distal aorta perfusion through the femoral artery. The results were good, no mortality and a morbidity rate perfectly comparable with that of the other techniques. The main limitation of the study is represented by the very small number of patients and, for this reason, I think the paper should be considered not as a Research study but as a Study protocol.

Specific comment:
• What kind of cardioplegia has been used?
• The mean flow of 1971 ml/min was not ASCP flow: it was cerebral and distal aorta perfusion flow.
• How many patients had preop visceral malperfusion? Can the retrograde perfusion from the femoral artery resolve a preop malperfusion? In the other hand, have they any information about the possibility of visceral malperfusion during retrograde CPB?
• After the distal anastomosis, they restart CPB in an antegrade way, or they still continue, through the femoral artery, a retrograde perfusion?

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

Declaration of competing interests:

No, I do not have any competing interest