Reviewer’s report

Title: Iatrogenic left anterior descending artery stenosis early after aortic valve replacement presenting with T-wave-pseudonormalization - a case report

Version: 1 Date: 8 December 2014

Reviewer: Jakob Dörler

Reviewer’s report:

The authors report an interesting case of coincidence of rare early postoperative proximal coronary stenosis after aortic valve replacement and T-wave-pseudonormalization during ischemic symptoms in a patient with a normal preoperative coronary angiogram.

The present case is well prepared and shows combination of a diagnostic pitfall within a potentially life threatening postoperative complication.

I think it is important to report and recommend to accept the present case for publication.

However, I have the following comments:

Minor revisions:
1) Concerning the initial evaluation of the clinical presentation with unstable angina: What were the results of standard laboratory tests – I would suggest to add at least a comment on the cardiac marker evaluation.

2) Did the authors an echocardiographic evaluation in the patient presenting with UA (prosthesis, abnormal wall motions,…). If yes, did it show any changes compared to the postoperative echocardiographic examination?

Discretionary revisions:
1) Since the iatrogenic stenosis is attributed to the antegrade cannulation of the LCA, the authors should add the type of cannula that was used to administer the cardioplegic solution (if applicable).

2) I would recommend to use the term rehabilitation instead of rehab (page3, 2nd paragraph).

3) The first sentence in the final conclusion (page 5) may be misleading. I would agree to prompt invasive management in the present case. However, the authors mentioned CT as an additional diagnostic tool in ICAS after AVR, which I would prefer as the next step in the absence of dynamic ECG-changes or positive cardiac markers in such a situation. I would suggest to reword the phrase.

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:

None to declare