**Name of journal:** World Journal of Virology  
**Manuscript NO:** 66004  
**Title:** Heart Failure in COVID-19 Patients: Critical Care Experience  
**Provenance and peer review:** Invited Manuscript; Externally peer reviewed  
**Peer-review model:** Single blind  
**Reviewer’s code:** 05935739  
**Position:** Peer Reviewer  
**Academic degree:** MD  
**Professional title:** Doctor  
**Reviewer’s Country/Territory:** United Kingdom  
**Author’s Country/Territory:** United States  
**Manuscript submission date:** 2021-03-19  
**Reviewer chosen by:** AI Technique  
**Reviewer accepted review:** 2021-03-19 20:56  
**Reviewer performed review:** 2021-03-25 04:09  
**Review time:** 5 Days and 7 Hours

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SPECIFIC COMMENTS TO AUTHORS
The findings in the article are original and are based on the literature review. The quality of the study is very good and methodology is used as per standards. It is evident that authors understand their limitations which has been mentioned clearly.
PEER-REVIEW REPORT

Name of journal: *World Journal of Virology*

Manuscript NO: 66004

Title: Heart Failure in COVID-19 Patients: Critical Care Experience

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03967085

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Assistant Professor, Chief Doctor

Reviewer’s Country/Territory: Bulgaria

Author’s Country/Territory: United States

Manuscript submission date: 2021-03-19

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-03-19 05:28

Reviewer performed review: 2021-03-27 17:32

Review time: 8 Days and 12 Hours

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SPECIFIC COMMENTS TO AUTHORS
The systematic review article is consistent within itself. The methods are valid and the criteria are fulfilled. The references are relevant and recent. The cited sources are referenced correctly. Appropriate and key studies are included. The paper is comprehensive, the flow is logical and the data is presented critically. However, there are some specific comments on weaknesses of the article and what could be improved:

Major points - none
Minor points 1. Why the discussion is divided further?
PEER-REVIEW REPORT

Name of journal: World Journal of Virology

Manuscript NO: 66004

Title: Heart Failure in COVID-19 Patients: Critical Care Experience

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 03498422

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer’s Country/Territory: Italy

Author’s Country/Territory: United States

Manuscript submission date: 2021-03-19

Reviewer chosen by: Ya-Juan Ma

Reviewer accepted review: 2021-03-27 17:36

Reviewer performed review: 2021-03-27 21:58

Review time: 4 Hours

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SPECIFIC COMMENTS TO AUTHORS
The Authors wrote a systematic review on HF and COVID-19, including both patients with preexisting HF infected by SARS-CoV2 and patients with de novo HF due to SARS-CoV2 infection. The topic is interesting, even though the analysis and presentation should be significantly improved. When the Authors divide the 26 studies into 4 categories, it is not completely clear the difference between the first ("studies highlighting care needs that require ICU level of care and outcomes in hospitalized COVID-19 patients") and the second category ("studies reporting outcomes in COVID-19 patients admitted to ICU"). Moreover, ref no.6 was present in both. Does the first category refer to hospitalized patients in general, while the second to ICU patients? Please better specify the distinction between the two. The paragraph on "Increased Risk of de novo Heart Failure in COVID-19 Patients" seems to refer to hospitalized patients because of COVID-19 in general, including patients with pre-existing HF and not only with de novo HF, so that the title should be changed. In the paragraph on "Increased Risk of de novo Heart Failure in COVID-19 Patients" the sentence "The proportion of patients with heart failure varied from 4% to 21%" is not clear and should be rephrased (if I understand correctly) as "The proportion of patients with PRE-EXISTING heart failure varied from 1% to 21%" (please note also that the lowest percentage reported in Table 1 was 1%, not 4%). The discussion is quite long compared to the previous paragraphs; in particular, the discussion about POCUS and echocardiography should be shortened. The Authors did not discuss the role of natriuretic peptide for diagnosis and risk stratification in HF/COVID-19 patients, giving also little space to troponin assessment. These highly reproducible, robust biomarkers should not be neglected in this patient population.
RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Virology
Manuscript NO: 66004
Title: Heart Failure in COVID-19 Patients: Critical Care Experience
Provenance and peer review: Invited Manuscript; Externally peer reviewed
Peer-review model: Single blind
Reviewer’s code: 03498422
Position: Peer Reviewer
Academic degree: MD
Professional title: Doctor
Reviewer’s Country/Territory: Italy
Author’s Country/Territory: United States
Manuscript submission date: 2021-03-19
Reviewer chosen by: Man Liu
Reviewer accepted review: 2021-05-10 15:01
Reviewer performed review: 2021-05-10 17:10
Review time: 2 Hours

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SPECIFIC COMMENTS TO AUTHORS
The Authors addressed all comments and improved the manuscript