



SDI EDITORIAL COMMENTS FORM

EDITORIAL COMMENT'S on revised paper (if any)	Authors' response to editor's comments
I agree with the reviewer since this case was reported correctly, however, there was nothing special or extraordinary. AV blocks are common in AWMi.	Dear Sir, Case reports in the past have described association of AV block with "acute MI" in general, but have not described the association of Type I second degree AV block with "anterior wall MI". AV blocks are more common with "Inferior wall MI", but they are very uncommon in "anterior wall MI". This case is the only case reported in our hospital, which has a full-fledged cardiology department, with annual admissions of average 4000 per year in my 5 years in this hospital. No such association is reported in our region. We are not able to find the case report describing this association separately from our region. Most important and rare finding was normal RCA, LCX and first septal perforator artery.
a) This manuscript describes a reversal of Mobitz type 1 second degree atrioventricular block for first degree AV block following successful percutaneous coronary intervention procedure of left anterior descending coronary artery in the context of myocardial infarction of the anterior wall. So, I strongly suggest modification in the Title of the manuscript (to be rewritten) to incorporate what seems the main message.	"Mobitz type 1 second-degree atrioventricular block in Anterior wall myocardial infarction– An extremely rare association." Changed to "Mobitz type 1 second-degree atrioventricular block in Anterior wall myocardial infarction and its reversal with successful PCI of Left anterior descending artery – An extremely rare association."
b) Abstract section should not contain abbreviations. Please rewrite it.	Done Sir
c) In addition, please authors should review the entire manuscript as there are still spelling errors.	Done Sir