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Comment On: Protective Effect of Amifostine on Radiotherapy Applied Cardiovascular Tissue

To the Editor.

I read the study with great interest and appreciate the thorough approach by the authors in investigating the manuscript titled "Protective Effect of Amifostine on Radiotherapy Applied Cardiovascular Tissue." Amifostine is a cytoprotective adjuvant used in cancer chemotherapy and radiotherapy to reduce the incidence of neutropenia-related fever, infection, and decrease nephrotoxicity.^{2,3} The cardiovascular effect of amifostine is not well known yet; while this study lays a foundation for future exploration, it is believed that certain critical aspects warrant further investigation. The authors aim to fill an important gap in the current literature and offer valuable experimental insights.

Due to the fact that the effects of radiation therapy typically take time to manifest, evaluations conducted solely during the acute phase (day 5) are insufficient. Amifostine may be toxic.4 Have animals been shown to experience any negative effects? No answer has been given to this query. Lesions are not named, and the visual data presentation is subpar in terms of image quality and microscopic images. They were constraints in general science and experiment.

When I evaluated the statistical procedures, I discovered that the tests utilized for ordinal data were not adequate. The studies employed the Pearson chi-square test, even though histopathological scores are ordinal data. More suitable tests would have been non-parametric or Fisher's exact test. The table in certain comparisons reports the post-hoc test results, but the text does not go into enough detail about them.

This study demonstrates that amifostine reduces this damage at both the histopathological and biochemical levels, indicating that it could be used as a preventive agent for cardiovascular complications in cancer patients receiving radiotherapy in the future.

In summary, while this study addresses an important topic and offers promising results, addressing the above limitations would greatly enhance the reliability and scientific contribution of the manuscript.

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LETTER TO THE EDITOR

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