Reviewer's report

Title: QTc interval prolongation in HIV-infected patients: a case-control study by 24-hour Holter ECG recording

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Reviewer: Stefano Ghio

Reviewer's report:

Aim of the study was to assess risk factors associated with QTc prolongation in HIV patients.

The population studied included: 32 HIV-infected patients with prolonged QTc interval and 64 HIV-infected subjects with normal QTc interval as controls. The results show that duration of HIV disease was significantly longer, waist/hip ratio was higher and abnormalities of autonomic balance were more frequent among cases than among controls.

The aim could be of interest to physicians, in particular to specialist of infectious disease.

The results are well discussed.

My main concern relates to the small number of patients enrolled, in particular taking into account the huge number of HIV infected patients who are regularly followed in the clinics of infectious diseases.

Comments/Suggestions to improve the manuscript:

- Please clarify in the methods and in Figure 1 how your final control population included 64 controls. In the algorithm figure, the arrows indicate how 32 cases were obtained. However, 40 pts with normal QTc from original group II + 9 pts with normal QTc from original group I make a total of 59 pts, not 64.

- No echocardiographic data are provided by the authors. This is a clear limitation. It should be recognized as a limitation if data are unavailable.

- The authors should better specify if the pts complained of symptoms such as angina or dyspnoea.

- Did the authors find any other ecg abnormality between the two groups of patients?

- Does a prolonged QTc carry any prognostic implication? Which is the f-up of the two cohorts? How did a prolonged QTc influence the follow-up of the patients.

In summary:

I am in favour of publishing the manuscript after adequate revision.