Reviewer's report

Title: Plasma NT pro-BNP, hs-CRP and big-ET levels at admission as prognostic markers of survival in patients with dilated cardiomyopathy

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Reviewer: Frank Dini

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In the study: “Plasma NT pro-BNP, hs-CRP and big-ET levels at admission as prognostic markers of survival in patients with dilated cardiomyopathy” Xiaoping Li and co-workers address the question whether the assessment of different peptides and cytokines were useful to risk stratify patients with HF secondary to dilated cardiomyopathy.

This is a well conducted and interesting study, but I have several concerns that the authors should address.

MAJOR CONCERNS

To this reviewer, it is not clear why the authors decided to determine circulating levels of NT pro-BNP, hs-CRP and big-ET at admission rather than at discharge. This should be considered a limitation, unless a specific reason could account for their decision.

The determination of cut off values for prognostic threshold levels of NT pro-BNP, hs-CRP and big-ET by ROC analysis should be described in the first paragraph of the results. This would facilitate the reader to understand the Kaplan-Meier results.

Big-ET level was not an independent predictor of the outcome, therefore, I would not have spent very much space in the discussion, to describe its significance. In my opinion, the authors should focus especially on the value of combined assessment of NT pro-BNP and hs-CRP to risk stratify patients with HF.

MINOR CONCERNS

The quality of Survival figures are not satisfactory. Please improve them. Moreover, due to the limited number of patients remained, they should better be truncated at 60 months.

Pay attention to acronyms and abbreviations. Sometimes, heart failure is used instead of HF.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, and I have assessed the statistics in my report.