Author's response to reviews

Title: Associations between Home and Ambulatory Blood Pressure Measurements and Cardiovascular Risk

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To Reviewer Asayama
First Passage: We have separated into a second paper considerations of cardiovascular risk as estimated by PROCAM.
1) We have added the flow chart as suggested
2) not relevant for this paper
3) We have changed Table 1 as desired. Our expert in statistics (Prof. Schulte-Moenting) believes that statistical tests of differences between males and females are inappropriate because it was not part of any prospectively defined hypothesis. Nonetheless, there was no significant difference in age between males and females but males tended to have a significantly higher BMI.
4) The Friedman analysis showed that there was a significant difference between the 3 measurements, inspection of Table 2 indicates where the differences would have arisen. We did not carry out a separate Friedman test restricted just to the 2nd and 3rd measurements in the triplicates.
5) To answer this question, we would have to devise a means of classifying the 270 subjects as fallers or non-fallers on the basis of the average of 22 triplicates contributed by each subject. This might be very complex: Some might always be fallers, some may never be fallers and some may fall sometimes but not others. Our statistical expert believes that 270 subjects is an insufficient number on which to carry out a multiple regression. However, he did examine the distributions looking for multimodality that might indicate the different types of responders.

Answers to Reviewer Yano
The English had been revised by an experienced native speaker, Dr. A. Black from Bristol who has been an editor and reviewer of several Journals. He has revised all of our previous work in the past and we had never received any request of this sort. We have shortened the manuscript by removing Part 3 into a
Abstract: We have changed the abstract to make it more clear.
Introduction: the study objectives are already clearly stated. They read as,
„We have used data from a blood pressure screening program in order to examine: (i) The discriminating power offered by more numerous HBPMs for distinguishing the first measurement in a triplicate from the second and third and, (ii) The difference between ABPM and HBPM in the same subject.“
Methods. We selected 125/80 mmHg as cut-off because our previous study showed that this criterion blood pressure gave the greatest degree of agreement between HBPM and ABPM in classifying subjects as hypertensives and normotensives (see attachment)
Results. We decreased the number of figures to 4 by excluding the PROCAM part.
Abstract. Part 3 has been excluded, so this objection no longer applies.
Introduction. We have changed two sentence and replaced BPM now by blood pressure measurement.