Reviewer's report

Title: A new scoring system to stratify risk in unstable angina.

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Reviewer: J. C. Kaski

Level of interest: A paper of considerable general medical or scientific interest

Advice on publication: Accept after discretionary revisions

I. Methodological comments: There are still some statistical and methodological issues that need attention.

1) Methods: The definition of AMI used to exclude patients is the old one. In fact the study includes patients with high troponin levels that nowadays would be considered to be NSTEMI (152 patients with a positive troponin test). This point needs to be discussed.

2) Statistical considerations:
   a) CRP is not normally distributed and this should be taken into account in the analysis.
   b) Comparisons between the 3 study groups (low, medium and high risk) should be carried out using ANOVA with a post hoc Bonferroni test.
   c) When the authors apply the score to the validation study group, only differences between the high risk group compared to low and intermediate group are found. However, in the whole group, significant differences between the three groups are referred. The authors should explain why they have applied the risk score to the group of patients that they used to define the score.
   d) Table 1 and figure 2 need p values.
   e) In table 2, the OR regarding age is missing. In addition, all OR should be presented even when the variables are not significant. In the same table, it should be mentioned that the dependent variable was the triple composite endpoint.
   f) There are some variables, statistically significant in the univariate analysis, that are not included in table 3. Also mention that the dependent variable was the composite triple endpoint.

II. In hospital treatments such as angioplasty, use of IIB-IIIA blockers, best-blockers etc can affect prognosis. This point should be mentioned as no specific analysis was carried out involving these points.

Competing interests:

None declared.