Reviewer's report

Title: One Year Follow-up of Patients with Refractory Angina Pectoris Treated with Enhanced External Counterpulsation

Version: 1 Date: 24 February 2006

Reviewer: Clas Mannheimer

Reviewer's report:

General
It is well written follow-up report of long-term results of enhanced external counter pulsation (ECP).

Several follow-up studies have indicated beneficial effects on patients with refractory angina. The principal objection of the present investigation is the study-design since it does not include the control-group, which shortly is mentioned in the last paragraph of the discussion. In addition the authors claim that the results of the study probably is not a placebo effect since the effects persisted for 12 months. However, I do disagree, since the results can be an effect of the special attention the patients have undergone during a follow-up as well. Furthermore, positive effects of the treatment can be a statistically error in terms of regression towards mean. According to the standard from evidence-based medicine this study only fulfill the criteria for follow-up report with a low EBM-score. These facts should be stated in a special section in the discussion - "Limitation of the study".

I am well aware of the problems of designing a randomized controlled trial with a placebo-group, which have no additional treatment in these patients. However, it had been possible to design a study with a control-group receiving another treatment modality for refractory angina pectoris such as spinal cord stimulation, which I think is used in the present center.

Morever the discussion can be shortened especially since some of the information is repeated there.

It would be of interest to add some information in baseline characteristics (table 1) such as attach frequency and nitroglycerin-consumption of the patients.

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Difficulties concerning figure I and II.

Reference list is rather meager concerning SCS, grasses epidural anesthesia and left stellat ganglium blockades,

Discretionary Revisions (which the author can choose to ignore)

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Level of interest: An article whose findings are important to those with closely related research interests
Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:

I declare that I have no competing interests.