Reviewer’s report

Title: Cardiac Asthma in Elderly Patients: Incidence, Clinical Presentation and Outcome.

Version: 2 Date: 23 April 2007

Reviewer: Claudio Tantucci

Reviewer’s report:

General
The paper is improved and the Authors carefully revised the manuscript according to the recommendations of the Reviewers, answering their questions on the point by point basis.

To be published, however, the manuscript (text, Tables and Figure) still needs further refinement.

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Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

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

The paper is improved and the Authors carefully revised the manuscript according to the recommendations of the Reviewers, answering their questions on the point by point basis.

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Abstract
Line 14 - “patients experienced more distal airway obstruction:
It would be better : “patients had greater peripheral airway obstruction:

Line 16 – “…of vital capacity of 0.99 vs 0.76 liter (p<0.05).”
It should be written : “…of vital capacity of 0.76 vs 0.99 L/s (p<0.05).”

Line 17: “…19%) and one year mortality rates (48% vs 43%) were similar.”
It would be better : “…19%) and one year (48% vs 43%) mortality rates were similar.”

Line 19 – “…and experienced more distal airway obstruction;”
It would be better : “…and experienced greater peripheral airway obstruction.”

Page 3
Introduction
Last paragraph, line 2 : “during CPE” should be changed in “during CHF”

Patients and Methods
First paragraph, line 2 : “ED” must be specified. I suppose Emergency Department.

Page 4
Selection and Participants
Line 5 : “by the experts”. Please, use “by experts” throughout the whole manuscript.

Data collection and processing
Line 9 and 10 : “As recommended for confirmed CHF in elderly patient,” should be changed in “As recommended for confirming CHF in elderly patients,”

Page 5
Line 4 : “as ejection fraction of left ventricle above 50%.” should be changed in “when the ejection fraction
of left ventricle was above 50%.
Line 6-7: “accordingly to orders by physicians in charge.” should be changed in “accordingly to the orders of the physicians in charge.”
Line 9: “The following variables were measured” should be changed in “The following indices were measured”.

“Confirmation of Congestive Heart Failure and BPCO” should be changed in “Confirmation of Congestive Heart Failure and COPD”

Page 6
First paragraph
Line 1: “The diagnosis of COPD was made by the experts according to a report...etc etc...” should be changed in: “The diagnosis of COPD was made by experts based on reports from a general practitioner, respirologist or medical chart from previous admission, symptoms (chronic cough and sputum production), clinical findings (including clinical signs of distension) and radiographic (chest X-ray and CT scan) findings of thoracic distension (21,22).

Please, deleted the sentence: “In the COPD group we also included chronic bronchitis and emphysema without broncho-constriction.” It can be better rewritten as follows: “Patients with history of chronic bronchitis and signs of emphysema but without PFT were also included in the COPD group.”

Outcome measures
Line 2: “followed-up...” could be more clearly written as follows: “followed-up by a phone call three months and one year after discharge.”

Page 8
Results
First paragraph, Line 4: “patients with CHF; 135 (64%) who were aged 80 years and above.” should be changed in: “patients with CHF of whom 135 (64%) were aged 80 and above.”

Line 5-6: “...asthma had a higher frequency...” should be written as: “...asthma had a higher frequency of tobacco use and diagnosis of COPD. They presented with hypercapnic acidemia....”

Last paragraph, Line 3: “The median length of stays was 11 (95% confident.....”. Why not interquartiles here?

Page 9
First paragraph, Line 4: “Cardiac asthma patients.....” This sentence would be clearer as follows: “Cardiac asthma patients exhibited greater peripheral airflow obstruction as shown by the reduced forced expiratory flow-rates at low lung volumes (Table 2)”

Discussion
Page 10
Line 3: “Cardiac asthma patients experienced .....” again: “Cardiac asthma patients exhibited greater airflow obstruction in the peripheral airways”.

Page 11
Second paragraph, line 5: “found the rate of wheezing to be 10-15% of non-elderly patients...”. It would be better: “found the rate of wheezing to be 10-15% in non-elderly patients...”.

Third paragraph, line 3 and 4: 20% or 22% (as in the Results section); 43 or 42% (as in the Results section)?

Last paragraph, Line 1: “The method used in our study to diagnose the cause of CHF and COPD ...” should be: “The method used in our study to diagnose CHF and COPD ...”

Page 12
First paragraph, line 1: Please delete “In retrospect...”
Limitations of our study

Comment

Usually the functional definition of COPD (according to the GOLD guidelines) is a post-bronchodilator FEV1/FVC % lower than 70. The reduction of FEV1 (as % predicted) is used to define the severity of disease.

Page 13

First paragraph, line 4: “independent of FEV1/FVC the usual index of obstruction in most groups…” could be more precisely written as follows: “independent of FEV1/FVC % the usual index of overt obstruction in most groups…”

Line 6: “history ….” should be: “history or decrease in FEV1/FVC %, appeared to be more flow limited during tidal expiration than those.”

Third paragraph, line 3: “wheezing” instead of “broncho-obstruction”

Fourth paragraph, line 3: “…to have an efficiency in cardiac asthma…” should be: “…to be surely effective in cardiac asthma…”.

Page 14

Line 2 and 3. It would be clearer to write as follows, “patients with cardiac asthma still had peripheral airway obstruction, suggesting a more marked airflow reduction if PFTs had been performed at admission to the emergency room.”

Conclusion

Line 3. Again, I would prefer for more clarity to write as follows; “Cardiac asthma patients were more hypercapnic and had greater peripheral airway obstruction. However, in these patients short and long term outcomes were not dissimilar from those of patients with classical CPE.”

Table 1

Page 23

Instead of “RV signs” please write “Signs of RV failure”

Table 2. Comparison of lung function parameters according to clinical presentation.

AGAIN (!?) FEV1 is expressed in L/s. Please, FEV1 is a volume!

“PEF rate” could be more simply written as “PEF”.

Figure 1. Immediate and long-term outcomes in either group.

Y-axis label “% of patients” instead of “Percentage”.

Legend: Cardiac asthma (n=75)
Classical CPE (n=137)

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after minor essential revisions

Level of interest: An article of importance in its field

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.