Reviewer's report

Title: Long-term outcome of infective endocarditis: a study on patients surviving over one year after the initial episode treated in a Finnish teaching hospital during 25 years

Version: 2 Date: 12 February 2008

Reviewer: Ana Revilla

Reviewer's report:

The authors make an analysis of long-term prognostic factors in more-than-one-year-survivors of an acute episode of infective endocarditis. In the revision, only more-than-one-year-survivors of an acute episode have been included, which makes the analysis to be valid for the hypothesis that they made.

I have some doubts on some aspects of the article (Discretionary Revisions):

- The authors conclude that patients with recurrent episodes of IE had significant lower mortality rates than those with not. In the first revision, authors were asked to discuss this finding. The answer given by the authors is that this can be due because recurrent episodes are most frequently right endocarditis in patients with intravenous drug uses (with low mortality), but authors do not explain this in the text. This must be indicated in the text, in the discussion. In addition, patients with recurrent episodes required cardiac surgery with less frequency (perhaps for the same reason).

- 27 patients died during the monitoring of the endocarditis sequelae. Which are these sequelae?

- The tables are very extensive and there are some of the data in the exposition of the results which are also repeated. I recommend the authors to include just the significant data in the tables or to exclude the enumeration of the non-significant from the text.

- The great heterogeneity of the population included in the study, makes difficult to take conclusions applicable to the daily clinical practice. I understand that, at this point, is not possible to separate the population into groups as this will change the analysis completely but I believe that this limitation must be mentioned at the end of the text when applying the results for the clinical practice. I really encourage authors to make in a future an analysis of long-term prognostic factors in more specific subpopulations as the left or prosthetic endocarditis ones.

What next?: Accept after discretionary revisions

Level of interest: An article of importance in its field
Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests