Author’s response to reviews

Title: The Peripheral Arterial Disease Study (PERART/ARTPER): Prevalence and risk factors in the general population

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Author’s response to reviews: see over
Dear Sir/Madame;

Please find attached the revised manuscript (4624169672979167) entitled “The Peripheral Arterial Disease Study (PERART/ARTPER): Prevalence and risk factors in the general population”.

The text has been reviewed by a native English speaker with expertise in correcting scientific papers.

Below please find the point by point answers to the referees’ suggestions and comments.

Referee 2 and Associate Editor’s comments:
1. The authors must send this manuscript for a professional editor to improve language problems, as “infraweight” (underweight), “transversal” (cross-sectional).
   Done.
   Page 20 line 7, page 21 line 7, page 4 line 15, page 9 line 22
   The reference #22 from the same authors was well-written. Do it again.
   Done.

   (2) Abstract and main text: do not use abbreviations as PAD and AAI.
   Done.
   We have removed abbreviations from the Abstract and the main text.

   (3) Abstract and main text: Describe not only the prevalence points but also confidence intervals. Done.

   (4) Methods: after the mention to reference #22, please spend at least ten lines to explain the sampling method. “Briefly, ....”.
   We have changed the first lines of the Methods section (from the start to Data collection) to provide more information to the reader, including the sampling method.

   (5) Results: for P values, only three digits, eg <0.001 and not <0.0005
   Done.

   (6) Table 1: change “healthy” for “control”, and switch the columns.
   To exclude column “total”. Done. One question: Do all variables matter? Not all variables matter in the same way. However, we believe that the information included in table 1 provides a complete description of our sample and explores the relationship between PAD and other characteristics that have been included in other studies.
(7) Table 2: do not show P values if you are using confidence interval, however it will mandatory to verify the P for trend when three or more categories have been considered. Done.

(8) Tables 2 and 3 are apparently contradictory. At least, they will confound our readers. I strongly recommend rebuilding the results with only two tables addressing gender differences. We disagree with the Associate Editor in this point. Table 2 shows much more information than table 3, since many variables have been excluded in table 3. In addition, table 2 allows to check which variables are significant in the age&sex adjusted model but not in the multivariate model, due to further adjustment. Nonetheless, if the Editor decides that is not possible to publish tables 2 and 3, we feel that it would be better to delete table 2 and keep table 3 as it is now.

(9) Each mention in a table/figure to multivariate regression must be accompanied by a footnote describing the variables used in the regression equation. Done.

(10) Discussion: compare epidemiological differences between peripheral artery disease and coronary heart disease (and, also ischemic stroke). Done.
Page 8, lines 12-14.

We hope the manuscript is now suitable for publication.

Yours sincerely,

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