Author's response to reviews

Title: Metabolic Syndrome in Rheumatoid Arthritis: case control study.

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Author's response to reviews: see over
Letter to the Editor of BioMed Central
Letter to the reviewers,

Rabat: 01/04/2013

Dear Sir,

We wish to thank you and the reviewers for your interest in our manuscript.

Please find attached the revised version of an article we have proposed for publication, entitled “Prevalence of Metabolic Syndrome in patients with Rheumatoid Arthritis and its determinants”.

Authors Rostom S et al, Editorial manuscript number: Ref.: Ms. 1161719207809910

We hereby confirm that the article has not been published and is not under consideration for publication elsewhere. There were no financial support or other benefits from commercial sources for the work reported on in the manuscript, or any other financial interests that any of the authors may have, which could create a potential conflict of interest or the appearance of a conflict of interest with regard to the work.

The manuscript has been read and approved by all authors.

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Reviewer's report 1:

1. The authors should clarify the study design because they changed the title as a "case control study" but in the discussion, they stated that the cross-sectional design of this study limited the ability to describe causal relationships.

We wish to thank the reviewer for his interest. Although the study design is case-control study (added as asked by the reviewer 2), it is cross sectional; therefore, it is difficult to establish a causal link between rheumatoid arthritis and metabolic syndrome.

2. Those factors that included in the multivariate analysis should be mentioned in the text or table (as footnote).

The reviewer is right; this description was added in the footnote table 5

Reviewer's report 2

1. My only concern is that the term "prevalence" remains in the abstract and manuscript despite concern that this is misleading (given that it is not a population based study). They do discuss this limitation in more detail now, so I think it's ok. Also the lack of multivariable analysis is disappointing, but may be out of the scope of the authors' aims.

We wish to thank the reviewer for his interest. The term "prevalence" was removed from the abstract and the manuscript.

Associate Editor's Comments:

Thank you for addressing most of the previous comments provided previously. In preparing a final revision, please pay particular attention to the following notes:

1. Table 1: Please clarify the distinction between the criteria used in the definition of JC2009 and NCEP ATP III 2004. As displayed in this table, they appear to be the same. Also, please clarify the phrase "And two or more of:" for IDF 2005, EGIR 1999 and WHO 1998. What does the "and" refer to?

NCEP ATP III criteria and JC 2009 did not require demonstration of insulin resistance per se. Moreover, no single factor was required for diagnosis, but instead, ATP III and JC2009 made the presence of 3 of the following 5 factors the basis for establishing the diagnosis: Abdominal obesity (which is highly correlated with insulin resistance), elevated triglyceride, reduced high-density lipoprotein cholesterol, elevated blood pressure, and elevated fasting glucose (impaired fasting glucose or type 2 diabetes mellitus). Both sides agreed that abdominal obesity should not be a prerequisite for diagnosis but that it is 1 of 5 criteria, so that the presence of any 3 of 5 risk factors
constitutes a diagnosis of metabolic syndrome. The only difference concern the definition of the thresholds for abdominal obesity, in the NCEP ATP III the cut point for obesity was determined as WC ≥ 102 cm (men), WC ≥ 88 cm (women). However in the JC 2009, the threshold waist circumference depends on the Population- and country-specific definitions because of different ethnic groups. In our country, the threshold of WC correspond to the IDF definition. (WC ≥ 94 cm men, WC ≥ 80 cm women). These modification were performed in the table I as asked.

"And two or more of:" for IDF 2005, EGIR 1999 and WHO 1998. What does the "and" refer to? For these 3 definitions The definition of metabolic syndrome focus on the presence of diabetes, glucose intolerance or insulin resistance together with the presence of at least two other components from a list of five components.

2. Table V: Please note as footnote which variables are included in the multivariate analysis.
   We wish to thank the editor, this This correction has been performed as asked.

3. Text: Throughout the text (including abstract), please remove "Met S" as an abbreviation. The paper would be clearer with the term "metabolic syndrome" written out.
   We wish to thank the reviewer; this has been performed as asked

4. Introduction: Start a new paragraph with the discussion of Morocco
   We wish to thank the editor for his interest. This supplementary population description was added in the introduction.

5. Methods - population: Approximately what proportion of the controls were drawn from family members of patients and what proportion came from family members of hospital staff?
   Family members of patients n=36, family members of hospital staff: n=64. These supplementary data were added in the patients and methods (healthy controls).

6. Discussion: Please provide reference for this statement "In our study, we did not find an association between older age and [metabolic syndrome], contrary to another study." (what other study are you referring to?)
   We wish to thank the editor for his interest; the references were added in the discussion.

7. In addition, please proofread carefully, looking for errors in punctuation and capitalization.
   We wish to thank the reviewer; the draft was corrected in term of English language and punctuation.