Reviewer’s report

Title: Supraventricular tachyarrhythmias after lung cancer surgery. Is amiodarone a safe antiarrhythmic to use?

Version: 1 Date: 27 March 2004

Reviewer: paola ciriacob

Reviewer’s report:

General

The manuscript by Barbetakis and Vassiliadis deals with an important subject that is often reported after lung resection and requires a multidisciplinary approach for its treatment. Moreover it reports about the use of amiodarone that due to its high pulmonary toxicity and its prohibitive cost in US, it is not frequently administered to patients around the world. This manuscript is well written and reports about a large number of patients presenting very good results. Although I have some remarks for the Authors:

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

In the total number of patients are included 51 lung biopsies. Although they had a thoracotomy, usually the smaller incision and the little amount of lung removed have a low impact on development of supraventricular arrhythmia (SA), therefore the inclusion of these patients decreases the incidence of postoperative occurrence of SA misleading the results. I think they should be removed from the study.

It would be interesting to assess in the Methods section if patients underwent preoperative cardiac evaluation and what kind.

It is known that SA is also correlated with hypertension. The last could be worsened by postoperative pain and it could increase the incidence of occurrence of SA. I think it would be valuable to add in the methods section the analgesia protocol carried out in the Author’s Department.

The reported dose of amiodarone in the Methods section of 300 mg in 30 minutes and 750 in 24 hours is a standard dose for all patients? I think it should be better to specify the dose mg/Kg.

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

Discretionary Revisions (which the author can choose to ignore)

What is the interval of time of the study? i.e. 1-2-5 years?
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:

"none"