Author's response to reviews

Title: Home Based Telemedicine Intervention for patients with uncontrolled hypertension: << a real life >> non-randomized study.

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Author's response to reviews: see over
Reference: Ms. 1392850474122338 – Home Based Telemedicine Intervention for patients with uncontrolled hypertension: “a real life” non-randomized study

Please find enclosed the revised version of the abovementioned manuscript. A native-English speaker with scientific expertise performed the copyediting of the new version of the manuscript, as required by the Editor.

With regard to specific requirements, we reply point by point:

“The authors responded appropriately to the comments of reviewer#1 (Eric Eisenstein)”

We thank the Reviewer for these positive comments.

“However the authors need to copyedit the manuscript because of language (style) errors (4b).”

I apologize for the many language (style) errors. A native-English speaker with scientific expertise performed the copyediting of this new version of the manuscript.

“For example, I found following.
Page 5, line 89: ?? arrived consecutively ??: the meaning of this phrase is unclear, because it suggests that there are also other groups.”

All patients were consecutively screened between September 2009 and September 2011. Patients came from a rural region and were referred to our outpatient clinic (at Fondazione Maugeri, Lumezzane Medical Center) by GPs for a cardiologic consultation.

“All patients in the study were from a rural-mountainous region, where cellular phone connection problem occur frequently. First we checked the T-Mobile coverage maps of the patients’ zone; then we asked.”

All patients involved in the study were from a rural-mountain region, where cellular phone connection problems are quite frequent. Therefore, we first check the T-Mobile coverage maps of the patient’s zone; then asked the patient to confirm the availability of telephone coverage.

“The remark about the provider T-Mobile prompts the question whether having a specific provider was a selection criterion for patient inclusion.”
The check of the coverage map, confirmed by the patient, only gave us an indication of the presence or absence of connectivity with all providers. Normally people know which is the best provider in the area where they live.

“See also the remark about having a good cellular phone connectivity, which doesn’t suggest a preference for a certain provider.”

We didn’t give us advice on an provider or another but only we verified the presence or absence of coverage in the area.

We hope that the current version of the manuscript can be now accepted for publication

Looking forward to hearing from you soon, we send our best regards.

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