Author's response to reviews

Title: Current ICD10 codes are insufficient to clearly distinguish acute myocardial infarction type: a descriptive study

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Author's response to reviews:

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Current ICD10 codes are insufficient to clearly distinguish acute myocardial infarction type: a descriptive study Roxana Alexandrescu, Alex Bottle, Brian Jarman and Paul Aylin

Dear Sir/Madam,

Thank you for your answer and for the reviewer suggestions.

Please accept our responses to reviewer suggestions including the page numbers on which the revisions appear.

The revised manuscript has been read and approved by all authors.

I look forward to hearing from you.

Sincerely,
Roxana Alexandrescu
Reviewer’s report
Version: 2 Date: 20 August 2013
Reviewer: Alessandro Barchielli

Reviewer’s report: Major Compulsory Revisions
The paper need of some other modifications:
1. In the Method sections authors write: “MINAP cover all acute hospitals” (see page 5, last row).
   In the Author’s response to reviews authors specified that Welsh data are incomplete, as some hospitals did not enter data). So they couldn’t compare rates between HES and MINAP. If the MINAP data are incomplete this should be specified in the method section; if they are complete the authors should compare also rates.
   We have now specified in the method section the issues related to the MINAP data (i.e., under-estimation of the cases) at page 6: ‘Of note, some of the hospitals do not report all their data due to lack of resources. As a result, in practice, MINAP dataset comprises the great majority of STEMI patients and only a part of NSTEMI patients.’

2. In the Discussion section authors write
   “Interestingly, (I21.9) (representing the great majority of I21 cases) had also exhibited high values of angioplasty use that might suggest that some of the cases within this large subcategory are in fact STEMI cases.” (page 8) In my opinion, the percentage of pts. undergoing angioplasty not is so high. In figure 2 it is lower than 10%! I suggest to modify the sentence avoiding to consider less than 10% an high values.
   Besides, why I21.9 is within brackets?
   We agree, the percentage of I21.9 patients undergoing angioplasty is not high and we amended the sentence at page 8: ‘Interestingly, I21.9 (representing the great majority of I21 cases) had exhibited moderate values of angioplasty use (under 10%) that might suggest that some of the cases within this large subcategory are in fact STEMI cases.’

Version: 2 Date: 29 July 2013
Reviewer: Amy Metcalfe
Reviewer's report:
The authors have adequately addressed the issues mentioned in the initial review. I have no further revisions.