Reviewer's report

**Title:** Identification of high risk patients with Hypertrophic Cardiomyopathy in a Northern Greek population.

**Version:** 1  **Date:** 1 July 2009

**Reviewer:** Quirino Ciampi

**Reviewer's report:**

The aim of the study the purpose of our study was the identification of high risk HCM patients coming from Northern Greece. The patients underwent noninvasive risk stratification for sudden cardiac death.

The authors studied 123 HCM patients and they demonstrated that HCM patients, in this regional Greek population, showed low risk for sudden cardiac death.

The paper is interesting, however, there are some suggestions:

1. This is only descriptive paper and does not present statistical data.
2. The authors did not report a statistical section.
3. Ambulatory ECG monitoring should be performed for at least 48 h in the screening for sudden cardiac death (ref #4 and #16).
4. The authors should report, in the methods section, the mode of measurement of segmental LV hypertrophy: in fact, in the methods section …“according to previous described methods (13)”.., the reference #13 is related to another group.
5. The authors should report all clinical (i.e. impairment in NYHA class) and, if possible, echocardiographic events (i.e. increase in LV diameters and/or volumes, increase or decrease in LV wall thickness) in the follow-up. The authors should report an event-free survival curve.
6. The numbers of events reported it is very low: only 2 patients presented antitachycardia pacing for sustained ventricular tachycardia.
7. How many patients had mitral regurgitation? How the authors differentiated from mitral regurgitation to LVOT gradient by means continous Doppler?
8. The LVOT gradient is a strong, independent predictor of progression to severe symptoms of heart failure and of death in HCM patients (Maron MS, New Engl J Med 2003, 348:295-303). The LVOT gradient should be included in the risk factors and the specific role of each risk factor should be analyzed in the results and in the discussion sections. In fact, in the identification of high risk patients, the authors refer to an older paper (ref #4, J Am Coll Cardiol 2000).
9. The authors should indicate the devises used (i.e. ecg monitoring, echocardiography, exercise test)
10. The references are old
**Level of interest:** An article whose findings are important to those with closely related research interests

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests