Reviewer’s report

Title: Biological efficacy of low versus medium dose aspirin after coronary surgery: results from a randomized trial [LREC 01/624]

Version: 2 Date: 20 March 2006

Reviewer: christiaan J vrints

Reviewer’s report:

General

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

In the present study clopidogrel therapy was initiated without a loading dose; this may explain the absence of an effect on platelet aggregation observed in the patients treated with clopidogrel; it is well known that without a loading dose it may take up to one week before an steady state of platelet inhibition by clopidogrel is obtained.

Platelet aggregation to ADP is more appropriate method for assessing the inhibition of platelet aggregation by clopidogrel. Did the authors perform this measurement in the patients treated with clopidogrel??

Up to 45% of patients show aspirin resistance; have the authors observed any patients with aspirin resistance and was there a difference in incidence between the low an high dose aspirin group?

Given the broad variation in % platelet aggregation and EC50 concentration was the study powered to find a significant difference between the high and low ASA group?

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

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Discretionary Revisions (which the author can choose to ignore)

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Which journal?: Not appropriate for BMC Medicine: an article of only archival interest, but might be suited to BMC Cardiovascular Disorders

What next?: Unable to decide on acceptance or rejection until the authors have responded to the major compulsory revisions

Quality of written English: Acceptable

Statistical review: Yes