Reviewer's report

Title: Tinnitus in elderly patients and prognosis of mild-to-moderate congestive heart failure: a cross-sectional study with a long-term extension of the clinical follow-up

Version: 2 Date: 5 December 2010

Reviewer: Berthold Langguth

Reviewer's report:

major compulsory revisions:

I am still convinced that this is a very valuable study, but I cannot follow the interpretation of the authors. The authors claim, that CHF may cause tinnitus via changes in the inner ear without causing a hearing deficit. This theory is contrary to the current understanding of the pathophysiology of tinnitus. Based on data from animal models and neuroimaging studies in humans it is currently assumed that tinnitus is generated in the central nervous system following reduced or distorted auditory input from the periphery. However this implies that there do not exist any changes in the inner ear, which may cause tinnitus without causing hearing impairment.

the answer to my comment about the potential role of depressive symptoms is not convincing. The authors mention first that CHF frequently causes depression and report that the rates of patients with depressive symptoms did not differ between groups (44 vs 47%). How were the depressive symptoms measured? It would make much more sense to quantify the amount of depressive symptoms per patient and to enter this value in the analysis, instead of using an arbitrary cut-off (depressive symptoms reported or not). Also the reported rates are low given that CHF causes frequently depressive symptoms.

The data in the table are still inconsistent for Warfarin and Ca-antagonists

Quality of written English: Acceptable

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

Declaration of competing interests:

I have no competing interests