Author's response to reviews

Title: Comparison of Prasugrel and Clopidogrel Reloading on High Platelet Reactivity in Clopidogrel-loaded Patients Undergoing Percutaneous Coronary Intervention (PRAISE-HPR): a study protocol for a prospective randomized controlled clinical trial

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Author's response to reviews: see over
Dear Editor,

We would like to extend our appreciation to you and the reviewers of "Trials" for the detailed and comprehensive comments. Your valuable and constructive feedback was well received by all authors and the second revision has been completed accordingly. We believe that these revisions have improved the overall structure and hope that the revised manuscript meets the requirements of your journal.

Thank you again for your valuable review and consideration.

Sincerely yours,

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Version: 2

Editor's comments:

Please, note that in the sample size rationale you have specified the expected proportion of screened patients that will be enrolled; but the reviewer asked you to specify the "assumed response rate in the control group". That is, your "primary objective (is) to detect a 15% difference in PR suppression". This difference can be from 20% (control) to 35% (treated) or from 50 to 65%. The proportion in the control group is needed to allow future independent replication of your calculations.

- We apologize for the oversight and all authors agree with the opinion. We have described the expected difference in response rate between the two groups and added a new reference. The calculation of sample size, in detail, including the assumed response rate in the control group is now specified.

On the other hand, I recommend you read again the item 11 about blinding in the CONSORT explanatory document (http://www.consort-statement.org/consort-statement/3-12---methods/item11a_blinding/) and to avoid conflicting terms such as 'open-label' in abstract and page 4 and 'double blind' in page 7. Please follow Consort advice and clearly specify who will be blinded.

- Thank you for the valuable comment and we apologize for the discrepancy. The study is an open-label study and we have now clearly specified who will be blinded.