Reviewer's report

Title: Is Mitral Valve Repair Superior to Replacement for Chronic Ischemic Mitral Regurgitation with Left Ventricular dysfunction?

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Reviewer: Ben Bidstrup

Reviewer's report:

The authors have reported on their experience of mitral valve repair for ischemic mitral regurgitation. The authors have combined type 1 and IIIB MR in this report. The mechanisms of MR are quite different, and the repair procedures are thus quite different. I would ask the authors to make some changes to differentiate between these two groups. Need to add different types in pre-operative data as well as in the followup data.

There is no mention of intra-operative TEE assessment of valves immediately prior to surgery, nor of the adequacy of the repairs when done.

In the tables of preoperative data, some statistics have been done (? t test). These are summary stats and it is not appropriate to perform any statistical analysis.

Are you able to provide some insight into the choice of repair vs replacement? Was repair more frequent in the latter part of the reviewed period. Thus time of operation might be a variable to be looked at in your logistic regression analysis.

Death certificates can be notoriously inaccurate. Has any work been done in China to validate the information on them?

In the discussion, you have referred to preservation of the valve during replacement as giving better outcomes. Can you provide some evidence that applies to this technique in MV replacement for ischemic MR?

Ultimately, survival is related to the degree of impairment of LV. This may be the cause of the lack of difference in survival between repair and replacement.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

Statistical review: Yes, but I do not feel adequately qualified to assess the statistics.

Declaration of competing interests:
I declare that I have no competing interests.

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