Reviewer’s report

Title: Antithrombotic treatment in elderly patients with atrial fibrillation: a practical approach

Version: 2 Date: 5 October 2015

Reviewer: Brian C Cooley

Reviewer’s report:

This manuscript provides a timely review and set of guidelines for use of direct oral anticoagulants versus conventional (e.g., warfarin) anticoagulation for atrial fibrillation patients.

1. The manuscript overall has many poorly written sections that should be rewritten.

2. Lines 129-130: “time in therapeutic range should be carefully controlled over time” -- How is time … controlled over time? The authors need to clarify this statement.

3. Lines 133-134: “alcohol abuse should be avoided” – When would it be recommended that alcohol abuse is ever okay? Perhaps the authors mean alcohol use, not abuse, in this context.

4. Lines 151-155: This entire paragraph pertains to anemia and has one citation in support, but this citation does not discuss anemia at all or even hemoglobin levels and hemogram evaluations for 6 or more months, or anything of relevance to the paragraph.

5. Lines 186-187: “A number of studies have shown that many patients with cognitive impairment and AF are not anticoagulated.” There are no reference citations for these “studies” anywhere in the paragraph; there should at least be a review cited and ideally some primary references.

6. Lines 233-234: “Antihypertensive treatment should be carefully prescribed in this population in order to avoid it” – What in this sentence is the “it” to be avoided? Antihypertensive treatment?

7. The abstract should be a summary of the text. It should not contain subsections entitled “Discussion” and “Summary”. The Summary section and the “Background” subtitles should be removed and the abstract should be a single paragraph.

8. The term, thromboembolism, should be defined more clearly, since it can mean venous thromboembolism or “systemic embolism”. The authors appear to be confining their use of the term to arterial-based thromboembolism, but this should be clearly stated.
9. The second heading of the text, “Discussion”, is not appropriate since this is generally reserved for discussing the preceding material that has been presented, not as the main subsection of the paper.

10. The term, fragility, is used to describe frail patients. Though this is commonly applied, it is more relevant to orthopaedic concerns (fragile bones, osteoporosis), and thus, frailty is the more generalized term to applied to the frail patient.

**Level of interest:** An article of importance in its field

**Quality of written English:** Needs some language corrections before being published

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

**Declaration of competing interests:**

I have no conflicts to declare, whether financial or non-financial.