Author’s response to reviews

Title: Cardiovascular outcomes associated with crush versus provisional stenting techniques for bifurcation lesions: A systematic review and meta-analysis

Authors:

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Author’s response to reviews:

POINT TO POINT RESPONSE TO EDITORS

Technical Comments:

(1) Please move your 'List of Abbreviations' to before your 'Declarations' section.

Author response: Thank you. Appropriate changes were made.

Editor Comments:

Please address the following issues:

- The manuscript, especially Introduction and Discussion paragraphs, needs substantial improvement of the written English with respect to grammar, punctuation and wording. E.g. avoid capital letter when not required ("Interventional"); pag.4 line 36-37 needs rewording; pag.8 line 44-46 needs rewording; acknowledgements need rewording; etc.

Author response: Appropriate changes were made as suggested.
Editor Comments:

- Abstract - page 2, line 13-17 [As systematic reviews … evidence-based practice] and line 33 [RevMan 5.3] are unnecessary information within the abstract and should be removed.

Author response: These unnecessary information have been removed.

Editor Comments:

Conversely more details should be provided with respect to objective and the primary endpoint of the analysis.

Author response: More information has been provided as suggested.

Editor Comments:

- page 6 line 11-13: please better describe the single components of MACE endpoint, e.g. all-cause vs cardiac death, any vs target-lesion vs target-vessel revascularization?

Author response: We have better described what was asked to. Thank you.

Editor Comments:

- Page 6, line. 27-30. The follow-up time considered for the analysis should be the maximum available follow-up for each study. Therefore, looking at Table 1, authors should refer to a period of 6 to 60 months, rather than 1 to 60 months.

Author response: Thank you. The suggested change was made.
Editor Comments:

- Search Outcomes (page 7 line 43, "total number of 1654 publication") and Fig.1 should be consistent. Specifically, the number of studies in the flow diagram appears incorrect.

Author response: Appropriate changes were made. Thank you.

Editor Comments:

- Please provide more details with regards to the sensitivity analysis, especially if results were consistent after the exclusion of the registry (Galassi2009) from the 6 studies included in the analysis.

Author response: Thank you, as suggested, changes were made appropriately.

Editor Comments:

- In view of the new indications for bifurcation lesions PCI according to the recently published ESC Guidelines on Myocardial Revascularization, a sub-group analysis on LM vs non-LM would be of great interest. Especially, if the benefit of crush technique vs provisional stenting in maintained also with regards to non-LM bifurcation PCI.

Author response: Unfortunately our data was restricted and did not permit us to carry out such an analysis. However, we have stated this point in the limitation section.

Editor Comments:

- Please improve the Discussion paragraph focusing on the results of your analysis rather than listing those coming from other studies.

Author response: We have enhanced the discussion part by focusing on our current result. Thank you.