**Author's response to reviews**

**Title:** Role of Baseline Echocardiography Prior to Initiation of Anthracycline-based Chemotherapy in Breast Cancer Patients

**Authors:**

Alain Mina (aam34@mail.aub.edu)
Hind Rafei (hindrafei@gmail.com)
Maya Khalil (mayakk9@gmail.com)
Yasmin Hassoun (yasminhassoun@gmail.com)
Zeina Naser (znasser6@gmail.com)
Arafat Tfayli (at35@aub.edu.lb)

**Version:** 3  
**Date:** 24 November 2014

**Author's response to reviews:** see over
Author's covering letter for initial submission

Title: Role of Baseline Echocardiography Prior to Initiation of Anthracycline-based Chemotherapy in Breast Cancer Patients

Authors:

Alain Mina (aam34@aub.edu.lb)
Hind Rafei (hindrafei@gmail.com)
Maya Khalil (mayakk9@gmail.com)
Yasmin Hassoun (yasminhassoun@gmail.com)
Zeina Nasser (znasser6@gmail.com)
Arafat Tfayli (at35@aub.edu.lb)

Version: 1 Date: 21 November 2014

Comments: see over
Role of Baseline Echocardiography Prior to Initiation of Anthracycline-based Chemotherapy in Breast Cancer Patients

Our manuscript tries to assess the impact baseline Echocardiography performed on patients with Breast cancer and no known cardiac disease nor symptoms of cardiac pathology, has been having on the managerial decision of physicians at the American University of Beirut Medical Center. We believe that once the implications of this practice have been brought to light, in part through our study, current practice guidelines and recommendations could be questioned.

The following is a letter to the Editorial Board at BioMed Central that was kind enough to send us expert reviewers’ comments regarding our manuscript. We took these comments very seriously because we are keen on publishing at the BioMed Central Journal.

Referee 1: Grzegorz Piotrowski Comments:

1. As recommended, the term “Suboptimal EF” was defined in the abstract as being less than 50%.
2. The abbreviation AUBMC was explained in the abstract as “American University of Beirut Medical Center”.
3. Parts of the Background section, second paragraph lines 54-59 were deleted as suggested.
4. Recommendations and guidelines by the American College of Cardiology/American Heart Association as to echocardiographic monitoring of cardiac function prior to cardiotoxic chemo-regimens were presented since they are of benefit to our article.
5. Conditions evaluated in the study such as hypertension and diabetes have been precisely defined as suggested.
6. The echocardiographic method has been described in the method section.
7. The process of individual inclusion to the survey has been more adequately described: Patients meeting the inclusion criteria were chosen consecutively between 2004 and 2012.
8. Exclusion criteria were more precisely stated.
9. As suggested by Dr. Piotrowski, A multivariate analysis using logistic regression was performed to detect any association between EF at baseline and cardiovascular risk factors (Baseline Ejection Fraction was the dependent variable). Adjusted odds ratios and their 95% confidence intervals were reported.
10. Results and discussion were separated from one another.
11. and 12. The conclusion was shortened and modified as suggested from “A sensible approach is to limit the baseline echo and periodic EF monitoring” to “Our study, as well as the previous contingent studies raise the question about routine echocardiography prior to anthracycline therapy and might eventually lead to a modification of current practice guidelines”, given that the first was too strong of a
conclusion for the number of patients we had with abnormal baseline echocardiography (6 out of 220).
13- The manuscript was reviewed again and edited for better content.
14- Reference list was edited accordingly

Referee 2: Carmen Criscitiello Comments:

“This paper draws strong conclusions without sufficient evidence (i.e. too small population, no randomization)”

As mentioned earlier, our conclusion was too firm considering the number of patients who had abnormal baseline echocardiography, and so it has been shortened and modified from “A sensible approach is to limit the baseline echo and periodic EF monitoring” to “Our study, as well as the previous contingent studies raise the question about routine echocardiography prior to anthracycline therapy and might eventually lead to a modification of current practice guidelines”.

Referee 3: Gopi Krishna Panicker Comments:

The abstract had stated that chi-squared test was used while the text in the methods mentions Fisher’s exact test. The test that was employed is in fact the Fisher’s exact test and the abstract was modified accordingly. The test used was stated in Table 3 Title. Full-terms were provided for acronyms such as EF (ejection fraction), AUBMC (American University of Beirut Medical Center) and CAD (coronary artery disease) when used for the first time in the text.

We thank you again for reviewing our manuscript and hope the modifications done with the updated version would be up to your expectations

Arafat Tfaili, MD
Associate Professor of Clinical Medicine
American University of Beirut Medical Center