Author’s response to reviews

Title: Is depression a real risk factor for acute myocardial infarction mortality? A retrospective cohort study

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We are grateful for the reviewers’ precious suggestions. Our point-by-point response to their comments is provided below.

Point-by-point response to Jaakko Keinänen (Reviewer 1)

1) We agree that Figure 1 was not very clear. We have modified it, starting the flow-chart with the 3,985 patients included in the analysis (there were 4,931 hospital admissions involving 3,985 subjects). We have clarified this point in the Methods (page 5, line 2) and changed the Results (page 7, line 13).

2) The Veneto Region has an established pharmaceutical database that is used to reimburse pharmacies for prescription medicines delivered to patients. That is why the drug prescriptions coincide with the drugs purchased. We have made changes in the Methods, (page 5, line 15).
3) Yes, Cox’s proportional hazards assumption was tested before running the analysis. We have now mentioned this in the Methods (page 6, line 26).

Point-by-point response to Phillip J. Tully (Reviewer 2)

We have deleted the sentence “The role of a history of depression as an etiological and/or prognostic factor in coronary heart disease remains controversial” from the Abstract (page 1, line 4), from the Introduction (page 3, line 24), and from the Discussion (page 12, line 18), and we have added the suggested reference in the Introduction (page 4, line 3 and 6), reference number 17.

We agree with the Reviewer, and we have consequently rewritten the rationale of the study (page 4, line 14), and we have replaced “depressed” or “not depressed” with “antidepressant user” or “not antidepressant user” throughout the article.

As suggested, we have better explained the ADs analyzed in the Methods (page 5, line 17) and we have added a descriptive analysis in the Results (page 7, line 18 and page 10, line 11).

We added the suggested references, number 16 and 33, in the Introduction (page 4, line 1) and the Discussion (page 11, line 14).

As suggested, we have reduced the use of acronyms (List of abbreviations, page 2)