Author's response to reviews

Title: A cross-sectional study on peripheral arterial disease in a district of Sri Lanka: prevalence and associated factors

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Author's response to reviews: see over
Here with I am submitting the revised version of the manuscript of article on “A cross-sectional study on peripheral arterial disease in a district of Sri Lanka: prevalence and associated factors”

According to the comments of reviewers necessary changes were made in the manuscript. The changes are as follows according to the comments. I would be grateful for considering the revised version of the manuscript for publication.

Reviewer 01 - Viswanathan V Mohan

Comment 1:
The title was modified and it was clarified in the 1st sentence of the discussion.
Title: A cross-sectional study on peripheral arterial disease in a district of Sri Lanka: prevalence and associated factors

Comment 2
The sampling method was further explained in the 1st paragraph of the methodology (line number 56-68). A schematic presentation of the study framework was included as Figure 01.

Comment 3
Sample size calculation was described in detail in the 2nd paragraph of the methodology (line number 69-76)
Comment 4
The clinical stage of PAD or the severity of the ischemia of those with PAD was classified according to Fontaine’s stages. This classification can either be done as Fontaine’s stage or Rutherford categories (Hirsch et al., 2005).

Comment 5
Results related to the pattern of alcohol consumption were included in the Table 04 and described in the results section.

Comment 6
We analyzed individual lower limbs for circulatory insufficiency in all 2779 participants. There were 130 affected lower limbs among the 88 individuals with PAD. There were 5428 lower limbs without PAD. In the methodology a description of examination of lower limbs for status of pedal pulses and signs of chronic circulatory insufficiency was included (lines number 100-104). Table 6 presents the total number of lower limbs of the participants. The explanation was also provided as a foot note of the Table.

Comment 7
Terminology was corrected in Table 06.

Comment 8
The objective of this study is to assess the prevalence and associated factors. We have analyzed the associated factors with the level of significance in the paper. We did not intend to present the risk factors for PAD in this paper using a case control design. Therefore we did not present odds ratio or beta coefficient. If reviewers think it is absolutely necessary to present those measures we can analyze those and present. However, the authors feel this is not necessary according to the objective of the study.

Comment 9
As suggested by the reviewers we have included distribution of BMI in the Table 04. The details on assessment of BMI were included in the methodology (line number 93-100).
However, the authors feel including more information such as blood pressure and history of hypertension in this paper may be confusing to the reader. Therefore, only the history of hypertension was included in the manuscript.

**Comments 10**

As mentioned in the methodology the medical history of diabetes mellitus, dyslipidemia, and hypertension, CAD, CVD and diseases related to PAD were based on self reporting and verified by available records or medicine. Detailed of the medication were not collected in comprehensive manner.

**Comments 11**

References were corrected according the guidelines

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**Reviewer 02- Konstantinos Tziomalos**

**Comments 1**

There were only 10 individuals with ABPI≥1.4. Hence, authors believe further analysis of this subgroup is unlikely to produce useful information.

Thank you

Janaka Weragoda

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