Author’s response to reviews

Title: The Prevalence, Burden and Risk Factors associated with Chronic Obstructive Pulmonary Disease in Commonwealth of Independent States countries (Ukraine, Kazakhstan and Azerbaijan): Results of the CORE study

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All comments were addressed. You can find below confirmation status for each point:

1) On the title page, please add the email addresses of the co-authors

   Added

2) As this is not a clinical trial, please remove the trial registration number after the abstract. For more information on this please go to: https://www.biomedcentral.com/getpublished/editorial-policies#trial+registration

   Removed
3) In the Declarations section, under "Authors' contributions" please use the authors’ initials and not their full names.

   Corrected

4) Under the “Prevalence of COPD” section:

   Similar picture was obtained for the prevalence of COPD among respondents ≥ 40 years old (Figure 2).

   Would suggest: A similar picture…..

   Corrected

5) Under “Comorbidities” section:

   Pneumonia in anamnesis (36.7% vs 19.4%, p=0.024 in Ukraine, 31.7% vs 14.9%, p=0.001 in Kazakhstan and 17.1% vs 5.9%, p=0.019 in Azerbaijan in COPD and non-COPD populations respectively) and previous cardiovascular disease (26.7% vs 6.0%, p<0.001 in Ukraine, 22.2% vs 7.8%, p=0.001 in Kazakhstan and 22.9% vs 3.5%, p<0.001 in Azerbaijan in COPD and non-COPD populations respectively) were significantly more frequent in COPD population than in non-COPD population in all investigated countries.

   Would suggestion: “A history of pneumonia…” instead of, “Pneumonia in anamnesis…”

   Also consider making the first sentence two sentences.

   Corrected

6) Under the “Discussion” section: The following sentence(s) do not read well. Suggest rewording.

   Relatively higher prevalence rates of COPD were observed in Kazakhstan compared to Ukraine and Azerbaijan; one of possible explanation may be relatively poor ecological conditions in Almaty, which is surrounded by high (3,000 – 5,000 meters) mountains and has not windy climate, whereas in Kiev and Baku it is windy and there is river or sea.

   For example, in Kazakhstan as early as 10-15 years ago COPD was considered to be as “exotic” disease; COPD diagnosis could be more probably established in specialized institutions, not by primary care physicians. Nowadays COPD is much more known, however, some public health problems may still exist; for example, medications for COPD treatment are free for a patient that may force health authorities to regulate the number of COPD patients registered in primary and specialty care.
8) Under the “Limitations” section: Typos and grammar

The subjectivity of the diagnostic criteria based on symptoms can lead to over-s or underdiagnosis. Spirometry was only one objective diagnostic method in the present study and its results were reviewed centrally, but difficulties of conducting can affect the results of this procedure.

Formatting errors were found in Tables 5 and 6.

In Figure 6, are the y-axis variables supposed to be OR? 1.0 instead of 1.0, etc.

Corrected