Author's response to reviews

Title: Troponin as ischemic biomarker is related with all three echocardiographic risk factors for sudden death in hypertrophic cardiomyopathy (ESC Guidelines 2014).

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Author’s response to reviews:

Dear Editors,

We greatly appreciate for comments of Reviewer #2. We try to improve manuscript according to these comments. All corrections in manuscript are marked by red color.

Reviewer #1: Thank you for your positive acceptance.

Reviewer #2:

1 a, b. We change the text in manuscript according to opinion of Reviewer

2. We modified sentence according to comment of Reviewer.

3. We adequate information was added in methodology section

4/5. We have discussed this problem in section of limitation. In our pilot study, logistic of ambulatory protocol (outpatient setting) was chosen. We agree with reviewer that the optimal protocol is more aggressive examination- using exercise stress test in patients without beta-blockers but the safety of patients is priority. In our pilot study, we aimed to make the first-ever observation on the correlation between hs-TnI release and timely synchronized findings on echocardiography. Our preliminary study showed that β-blocker withdrawal or specially performed exercise test might not be safe among this group of patients. In future studies, we will attempt to increase the dose and use only one type of a β-blocker to decrease ischemia burden and the risk of troponin release in exercise test. We need acceptance the new study protocol by the local institutional review board. We are going to perform upright exercise with LVOTG measurement at peak and post-exercise in upright position.
6. The workflow of echocardiographic examination has been as follows:

a/ standard echo examination in resting condition in supine position (the last stage of examination was LVOTG measurement using 5-chamber apical window).

b/ immediately, Valsalva maneuver was perform in supine position with LVOTG measurement

c/ patients were asked to stand up with their left hand on their head

d/ LVOTG was measured in 5-chamber apical window when patient was in standing position

7/8. The calculations of Pearson correlation was proposed by Reviewer #1. In current version of manuscript, the Pearson correlation has been described in the Statistical Analysis section. The new comments have been added in Discussion section.

9. The discussion section has been improved and new reference has been added.

10. The English language has been improved.