Author’s response to reviews

Title: Risk factors of atrial fibrillation occurring after radical surgery of esophageal carcinoma

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Version: 1 Date: 01 Feb 2019

Author’s response to reviews:

Dear Vipin Zamvar:

We thank the editors and reviewers for reviewing our manuscript very much. The response to reviewers is addressed in detail below. The changes in the text are highlighted in green words.

Reviewer reports:

Reviewer #1: I would like to thank the authors for their efforts for submitting this manuscript entitled (Risk factors of atrial fibrillation occurring after radical surgery of esophageal carcinoma).

It is a retrospective study in a single institution. It is an interesting manuscript and well written.

However, I have some comments for the authors:

Question 1:
1) Page 8, line 2 (within one to three days after radical surgery of esophageal cancer in 19 days), 19 days should be 19 patients?

Answer 1:

I am sorry for the lapsus calami. “days” has been changed into “cases”. (In page 8, line 4)

Question 2:

2) Page 13, line 5 (Both domestic and foreign literatures have reported that pericardial operation may increase...), what is meant here by domestic and foreign literature?

Answer 2:

This sentence has been changed as follows:

It has been reported in many literatures that pericardial operation may increase the risk of AF. (In page 13, line 18)

Question 3:

3) I wonder, can the authors mention how many patients have combined risk factors and if this can be related to the time of development of AF. Moreover, authors did not mention if the AF treated or was persistent, and ways of management of the postoperative AF.

Answer 3:

Thanks for you professional comments.

Firstly, it is shown in Table 3 that how many patients have combined risk factors. (In page 10, line 6)

Secondly, in this study, AF occurred within 24 h after radical surgery of esophageal cancer in 15 cases, within 2 to 3 days after radical surgery of esophageal cancer in 19 cases, within 4 to 5 days after radical surgery of esophageal cancer in 8 cases and 6 to 7 after radical surgery of esophageal cancer in 6 cases. (In page 8, lines 3-6)

The specific relation between the risk factors and the time of development of AF will be explored in future studies.

The patients who had postoperative AF were treated. In details, for the patients who had AF within 24 h after radical surgery of esophageal cancer, cordarone was directly used for
cardioversion of AF to sinus rhythm; for the patients who had AF 24 h after radical surgery of esophageal cancer, cordarone was used for cardioversion of AF to sinus rhythm after atrial thrombosis was excluded or patients received 3-week anticoagulant; and for the patients who had recurrent attacks of AF for 3 times or over; radiofrequency ablation was used for cardioversion of AF to sinus rhythm. (In page 7, lines 7-14)

Of the 48 patients with postoperative AF, successful cardioversion of AF to sinus rhythm was performed by cordarone in 47 patients and by radiofrequency ablation in one patient. (In page 8, lines 7 and 8)

Reviewer #2: This is a retrospective study analysing the incidence and the associated risk factors for atrial fibrillation (AF) occurring after radical surgery for esophageal carcinoma. The authors demonstrated that age, gender, history of cardiac disease, pre-operative level of pro-BNP, surgical approach, intraoperative blood transfusions and adenopathy between esophagus and pericardium were risk factors of AF on multivariable analysis.

Question:

In my opinion, the whole paper should be revised because of the presence of some methodological mistakes that preclude its publication. In particular: in the paragraph Material and Method a description and a table of the whole study population should be present; secondly it is necessary to explain what were the selection criteria and the variable selection criteria; third the statistical analysis lacks of some important examinations as the univariate logistic regression and finally in the paragraph Results the list of risk factors should be associated with odds ratio, CI 95% and p value. The abstract should be completely revised based on these suggestions.

These are just a few comments. Please, re-think your manuscript carefully and made corrections.

Answer:

Thanks for you professional comments very much.

In the paragraph Material and Method, we added a description about the whole study population. (In page 5, line 21; and in page 6, lines 1-7)

The inclusion and exclusion criteria are in page 5, lines 15-19.

The variable selection criteria are as follows:

We retrieved the papers in the data banks including PubMed (January, 1992 to August, 2016), OVID Evidence-Based Medicine Database (January, 1994 to August, 2016), full-text database of Chinese journals (January, 1994 to August, 2016), VIP database (January, 1994 to August, 2016) and Wanfang database (January 1994 to August, 2016) using the search terms including English
search terms such as esophageal cancer, atrial fibrillation, radical surgery and risk factors, as well as Chinese search terms such as 食管癌, 房颤, 根治手术 and 风险因素. We obtained 78 papers about AF risk factors after radical surgery of esophageal cancer. There were 13 factors which were mentioned in more than 6 papers, so the 13 factors were analyzed in this study. (In page 6, lines 13-20; and in page 7, line 1)

You are right. The odds ratio, CI 95% and p value have been added in the result section. (In page 8, lines 12, 13, 15, 17, 18, 20; in page 9, lines 2, 4, 6, 9, 11, 13, 15, 20; in page 10, lines 1-5)

The abstract has been completely revised based on these suggestions. (In page 3, lines 6-8, 14-22; in page 4, lines 1-5.

Reviewer #3: The authors compared understood risk factors for post-op Afib to their database of 335 patients that underwent esophagogastrectomy for cancer. They identified that many believed risk factors did influence the main outcome of Afib on univariate analysis but also certain believed risk factors did not influence Afib risk in their patients.

With revision for English grammar this study can provide useful guidance to clinicians caring for patients with esophageal cancer.

Gramatical errors:

Question:

Abstract, Page 3, Methods... retrospectively analyzed.

Answer:

Right. It has been changed into “retrospectively”. (In page 3, line 6)

Question:

Introduction... page 5, "A large number of literatures have confirmed that AF occurring " english grammar error.

Answer:

This sentence has been changed as follows:

Postoperative AF will further increase the risk of stroke or thrombosis, mortality, hospital day and health care cost. (In page 5, lines 6 and 7)
Question:

Diagnostic criteria.. page 6, "Diagnostic criteria of postoperative AF: The AF was in line with the following 3 items:" recommend different phrasing than "in line with"

Answer:

This sentence has been changed as follows:

The postoperative AF was diagnosed according to the following 3 items. (In page 6, line 9)

Question:

Page 6, "Refer to the related literatures worldwide [5], the 13 factors were served as suspicious risk factors of postoperative AF, "

Answer:

This sentence has been deleted. (In page 6, line 13)

Question:

Page 8... "These factors increased the risk of postoperative AF from high to low as follows:" this is confusing grammar.

Answer:

This sentence has been changed as follows:

These factors increasing the risk of postoperative AF were as follows in the order from high to low: (In page 10, line 7)

Question:

Page 9... "Although clinical workers have made great efforts " needs grammar improvement.

Answer:

This sentence has been changed as follows:

Although clinicians have tried to reduce the occurrence of postoperative AF (In page 10, line 13 and 14)