Reviewer’s report

Title: ECHOCARDIOGRAPHIC EVALUATION OF NON-SURGICALLY TREATED MILD-TO-MODERATE MITRAL DYSFUNCTION IN PATIENTS UNDERGOING AORTIC VALVE REPLACEMENT

Version: 0 Date: 09 Feb 2019

Reviewer: Jacob Bergsland

Reviewer's report:

The article could be very interesting, but requires complete revision and I also have a couple of important questions. At present the article looks at a fairly large number of patients who underwent AVR with the presence of preoperative mild to moderate MR and who did not have a procedure on the mitral. Considering that the total number of patients with mitral dysfunction was 560 of which 292 did not have MV procedure, this means that 268 did have repair or replacement among the total group of patients. It seems to me that it would be very most relevant to compare the groups with and without MV procedure. Did the authors or some other authors maybe do that in another article? In that case the whole concept of the article seems questionable, or at least the authors would have to refer to any previous publications related to these patients. At the very least the authors would have to explain why half the patients got mitral valve procedures and half not. This may be individual surgeon preference, different time periods or other factors. The results of the approach used in this study, are quite positive, with very little mitral valve surgery in the follow up period, except for rheumatic patients. But I find it essential to know at least a little about the 268 patients who had MV surgery. Otherwise the readers may draw the wrong conclusions.

The figure legends are insufficient. It must be explained in more detailed that the uni- and multivariate analysis are used to evaluate which preoperative factors are important for postoperative mitral regurg.

Fig 2 is impossible to understand at least to me. 229 patients are listed as mild and 58 as moderate MR preop. So some patients are lacking on the preop side. More seriously, the postoperative result is the same in both groups:

Of the 58 patients with moderate MR preop 206 have normal to trivial postop. This is obviously not possible. Maybe it should be 41 as is indicated on the line between the two boxes, but this figure is obviously not correct. Also in the upper part of the figure the number of postop results does not fit the preop number of patients.
**Level of interest**
Please indicate how interesting you found the manuscript:

An article of importance in its field

**Quality of written English**
Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

**Declaration of competing interests**
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

2. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

3. Do you hold or are you currently applying for any patents relating to the content of the manuscript?

4. Have you received reimbursements, fees, funding, or salary from an organisation that holds or has applied for patents relating to the content of the manuscript?

5. Do you have any other financial competing interests?

6. Do you have any non-financial competing interests in relation to this paper?

If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

I declare that I have no competing interests

I agree to the open peer review policy of the journal. I understand that my name will be included on my report to the authors and, if the manuscript is accepted for publication, my named report including any attachments I upload will be posted on the website along with the authors' responses. I agree for my report to be made available under an Open Access Creative Commons CC-BY license (http://creativecommons.org/licenses/by/4.0/). I understand that any comments which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

I agree to the open peer review policy of the journal