Author’s response to reviews

Title: The role of a structured exercise-training program on cardiac structure and function after acute myocardial infarction: design of a prospective randomized study

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Author’s response to reviews: see over
Dear Prof. Doug Altman

Editor in Chief Trials,

In attachment we send you the revised version of the article: "The role of a structured exercise-training program on cardiac structure and function after acute myocardial infarction: design of a prospective randomized study".

First, we would like to thank the reviewer for his comments and suggestions that helped to improve the new version of the manuscript. As you will notice, we addressed all the reviewers’ comments and made the requested changes in the revised version of the manuscript.

Please find below a point-by-point reply to the reviewers’ comments:

**Reviewer’s Comments**

"I have reviewed this protocol manuscript. It contains the necessary items. I have just a few comments:

a) I noticed an occasional grammatical or spelling error (e.g., on page 3, “access” should be “assess” and a word is missing in the next to last sentence in the middle paragraph). It would be worthwhile for the authors to ask a native English speaker to go over the manuscript.

Author’s Reply:

In the revised version of the manuscript we have corrected the grammatical and spelling mistakes raised by the reviewer. Furthermore, we have asked a native English speaker to read the manuscript and a few minor corrections were included in the revised manuscript.

b) The sample size should be mentioned in the Abstract.

Author’s Reply: As requested, this information has been added in the abstract.

c) It is unfortunate that the block size is disclosed in the Methods section. Particularly in an unblended trial, that allows investigators to know the last (and perhaps next to last) assignment within each block.

Author’s Reply: We agree with this point raised by the reviewer. However, this is not an important limitation of the study because the cardiologists performing the echocardiograms (primary endpoint) and the cardiopulmonary exercise test were blinded for the type of intervention.

d) The Trial Status should be updated.

Author’s Reply: In the revised version of the manuscript we have updated the trial status.