Author’s response to reviews
Title: Stent thrombosis associated with drug eluting stents on addition of cilostazol to the standard dual antiplatelet therapy following Percutaneous Coronary Intervention: A systematic review and meta-analysis of published Randomized Controlled Trials

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Author's response to reviews:

POINT TO POINT RESPONSE TO REVIEWERS

Reviewer reports:

Peter Penson (Reviewer 1): I enjoyed reading this interesting manuscript. The paper describes an important clinical question. I have the following comments.

Author response: Thank you very much for your encouraging comments.

Peter Penson (Reviewer 1):

Authorship:

The authorship of the manuscript is unclear. The title page lists one author's names, but the contributions section has more than one set of initials. The methods section appears to suggest that a single author may have conducted the searches and data extraction. I would strongly suggest that a second author checks all stages of searching, screening papers and data extraction. If this has been done already, it should be stated in the manuscript.
Author response: A second person was involved in the search and data extraction process, however, since that colleague did not satisfy all the criteria for authorship, his name was not included as an author. We have mentioned his role in the method section, and we have acknowledged his contribution at the end of the revised paper. Thank you.

Peter Penson (Reviewer 1):

Language:

There are many errors in the use of English Grammar in the manuscript. Sometimes (e.g. the first paragraph of the background section) this makes it very hard to understand the flow of the argument. I would strongly suggest review of the manuscript by an English Language editing service.

Author response: The manuscript was re-checked for language issues and appropriate corrections were made to the revised version.

Peter Penson (Reviewer 1):

Search strategy:

Please provide a separate document with the full search strategy for all databases.

Author response: A separate document describing the search strategy has been attached. Thank you.

Peter Penson (Reviewer 1):

Protocol Registration:
Please indicate whether the protocol for the study was prospectively registered (e.g. in the PROSPERO database)

Author response: It is not compulsory to register meta-analyses. Therefore, this analysis was not registered. We have mentioned this in the method section of the revised paper.

Peter Penson (Reviewer 1):

Minor points:

You frequently refer to 'guidelines' in the text, it would be helpful at each instance to explicitly state which guidelines you are referring to.

P3 Line 24: Please clarify what is meant by 'effective cardiac outcomes'

P5 L54: The study was presumably assessed according to the criteria of the Cochrane collaboration - rather than by Cochrane as stated.

P10 L7: Please clarify what is meant by 'better outcomes'

Author response: We have tried to explicitly state the guidelines appropriately.

We have clarified about the meaning of ‘effective cardiac outcomes’.

Cochrane has been changed to Cochrane collaboration.

We have clarified the meaning of ‘better outcomes’ appropriately or we have changed the words for other more appropriate terms.

Peter Penson (Reviewer 1):
Discussion

-Given that there was no overall effect of cilostazol on the whole population, it was perhaps ambitious to expect that you might find differences in subgroups.

Author response: Yes, but we had to show the results for all the subgroups appropriately. Even if the result was similar, we had to show this, that is what our analysis is about. Each subtype of stent thrombosis had to be illustrated by forest plots. The analysis was not to show only one main result. All the subtypes had to be assessed systematically, this is what was new about this meta-analysis. Thank you.

Yubin Wu (Reviewer 2):

Author Huang aimed to systematically compare stent thrombosis and its different subtypes in patients who were treated with DAPT (aspirin and clopidogrel) versus TAPT (aspirin, clopidogrel and cilostazol).

This analysis was carried out for a short term duration time period of less than or equal to 6 months and a longer duration time period of greater or equal to 1 year.

The author concluded that no significant stent thrombosis was observed with the addition of cilostazol to DAPT following PCI.

This is a very interesting study with interesting results. Well written and well-presented. The conclusion is well-supported by the data, and data are adequate to reach a robust conclusion.

The idea concerning stent thrombosis and its different subtypes is new. Several previous meta-analyses have compared DAPT with TAPT but stent thrombosis especially its different subtypes (acute, subacute, late, definite and probable ST), and with different follow-up time periods were seldom systematically compared. Therefore, this analysis represents another novelty in the clinical literature of Interventional Cardiology.
The link between the title, the aim and the conclusion has well-been established. The abstract stands unique on itself summarizing the whole paper and it has well been structured.

Publication bias was adequately represented through funnel plots.

The paper is to the point, and very specific. I would like to congratulate the authors for such an interesting piece of information related specifically to drug eluting stents and the different types of stent thrombosis; which well suits this Journal (since it is related to pharmacology and toxicology).

Author response: Thank you very much for your great comments. You must have gone through several recently published analysis in order to figure out why this one was still showing something new. Thank you.

Yubin Wu (Reviewer 2):

I would suggest some minor changes prior to publication of this article:

1. Please mention in the result section that, publication bias was represented through funnel plots because of the presence of a small volume of studies.

Author response: This has been mentioned appropriately.

Yubin Wu (Reviewer 2):

2. Please, add the name of any person who indirectly contributed to the data search or extraction or writing the final draft in the 'acknowledgement section' if they were not completely involved in the manuscript. For meta-analyses, there should be another person to check the data. The author might have ignored this, but names of persons who have contributed in any way to the manuscript has to be acknowledged.
Author response: As we previously mentioned, the name of any another person who contributed to this manuscript was acknowledged at the end of the manuscript. Thank you.