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Journal Name:	Asian Journal of Cardiology Research
Manuscript Number:	Ms_AJCR_43618
Title of the Manuscript:	To Study The Efficacy Of Ischemia Reversal Program (IRP) In Elderly Patients Of Ischemic Heart Disease With Known History Of Hypertension
Type of the Article	Original Research Article

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This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	Need compulsory revision: The reviewer would like to ask the authors about the similarity with other study conducted at Madhavbaug clinics in Maharashtra, India in 2017 with sample size 38. The title of the study "Study of efficacy of ischemia reversal program (IRP) in ischemic heart disease (IHD) patients with VO2max and Duke's treadmill score" that published by International Journal of Basic & Clinical Pharmacology in 2018, with the following authors: Rohit Sane, Varada Sugwekar, Aarti Nadapude2, Archana Hande, Gayatri Depe, Rahul Mandole. The present study conducted also in Madhavbaug clinics outpatient department, India in 2017with sample size 30. This is very important point that needs to be answer?? Abstract Need rephrasing, the aims of this study is not clear presentation. Introduction This part needs rephrasing and rewriting. The introduction part is very important for readers to follow so need to be interesting and clear represent for the information with more reference citation and extensive literature review about the Panchakarma therapy (used in chronic phase of disease) and Ayurvedic Science of Medicine (used in acute phase od disease) in the world and India. Need more detail regarding the five steps of this treatment and the advantage and disadvantage of Panchakarma. In the introduction part the authors mention in page 2, line 44, "combines Panchakarma with diet". The part need more detail about the type of diet intake daily. Page 2, line 49 and 50, the authors need to change the word "we" to for e.g. "in this study" Page 2, line 52, the authors mention "Duke's treadmill score". In this part the authors need more information about the relation of IRP on Duke's treadmill score and what the outcome form this measurement using extensive literature review and reference citation. Materials and Methods Need to be clear with more detail about how to collect data by interview or take data from medical report?? How the patients were collected by randomization or other? Page 2, line 61, the authors mention "The patients followed diet chart/plan of 1000-1200 kcal/day" No information regarding the diet chart or how the authors collected data by patients report or by diary recording daily? No information regarding the study protocol and by whom was approved	Yes intervention was same in both the study, In this study we observed IHD patients who had a history of hypertension. In madhavbaug OPD per year around 1200 IHD patients get treatment, These 30 subjects are different from earlier 38 IHD patients. Relevant literature is already cited. Acute and chronic phase of disease treatments are evidence based in authors clinical practice. Citation included now. It is a real time data, physician who see the patients in OPD examine him and record all available data in Madhavbaug's clinic management software, We collected 30 patients data(no randomization) who completed 3 months follow-up. Thanks a lot for this query, Duke treadmill score was a primary efficacy endpoint and stress testing every month is physically and financially difficult for patients so we choose 3 months parameter for a study. But we can definitely think about studying other parameters on monthly basis



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	(Scientific ethic committee). Also no information regarding the consent form that should be gives prior to participation in the study. It is written or verbal? Page 2, line 63, the authors mention "Only those patients were finally included wherein complete data of patient from day 1 to day 90 of IRP was available from OPDs of Madhavbaug clinics located across various cities in Maharashtra state" Why the authors did not follow the patients monthly? What the rational of just check the study parameter only at day 1 (baseline) and repeated at day 90. Statistical analysis Why the authors did not using Predictive Analytics Software for statistical analysis? The distribution of data used for analysis was not specified (normal or not normal distribution). How the Duke's treadmill score was calculated and which score is low or high? Need more information. Result This part is not clear representing for data and need rewriting??? This is really confusing for the reader to follow the results, and the table and figure not clear. Most of the results were significant, although the sample size is very small for significance. Page 6, line 160, the authors mention "in all drug class, with greatest <i>reduction</i> in biguanides, beta blockers and antiplatelet drugs" the authors need to check the table for biguanides and Sulfonylurea the percentages are same (no change from baseline), for beta blockers the percentage is increase form 33.33% to 36.67% and antiplatelet also increase from 30% to 33.33%. Discussion This part needs rephrasing, rewriting and consistent with aims of the study. In its current format it is hard to follow. In page 7, line 177 "the authors mention for the same". What this mean?? Needs to mention other study done in India or other part of the world using Panchakarma therapy?? What are the recommendations from the result of this study for the patients? Did the patients need to do this type once yearly or twice or when needed? In page 7, line 178 to line 181, the authors did not mention even one reference, need rephrasing and rewriting. Page 7, line 183 to 189, need to move to introduction part. Page 7, line 200 to 203, need to move to methods part.	The objective of the study to compare the study parameters at the 90th day from the baseline so we used Wilcoxon signed rank test to assess mean difference. For analysis we have used R software. Here there was no prediction Data was non-normal so we used non parametric test. As mentioned earlier in introduction part that some effects of panchkarma takes time to come into effect. This is personal experience of Ayurvedic physicians that significant effects are seen after 90 days. Though the sample size is small; mean difference between baseline and after 90 days and test statistic was significantly high. 3 months intervention of IRP is effective in reducing symptoms of IHD and improvement in quality of life. Duke treadmill score is predictor of risk of acute coronary event We observed that DTS is changed significantly that suggest positive impact on these patients health. IRP is one year intervention of panchkarma therapies along with diet modification, so we need to perform 1 year intervention study to come to robust recommendation. For now we can recommend that every IHD patients along with his standard care therapy should get this therapy to modify/reverse stable IHD. Dukes interpretation is already provided from line no. 197 to 205 with citation of literature. "For the same" means treatment available for IHD and HTN. Already mentioned in lines 207 to 209. All those lines are adopted from reference no. 21, which is cited properly. It is in line with panchkarma therapy. These are interpretation part, so ideally has to be in discussion only.
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Minor REVISION comments		
Optional/General comments		