



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	Cardiology and Angiology: An International Journal
Manuscript Number:	Ms_CA_19495
Title of the Manuscript:	Role of Hs-CRP and Exercise Stress Echocardiography in Cardiovascular Risk Stratification of Asymptomatic Type 2 Diabetic Patients
Type of the Article	Original Research Article

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
<p>The manuscript has improved, in particularly, the discussion part. Unfortunately, not all my criticisms have been dealt with appropriately, and new issues have arisen.</p> <p>1. abstract, line 17: sensitivity of hsCRP <i>in detecting CAD</i> should be replaced by sensitivity of hsCRP <i>in predicting a positive exercise stress echocardiography</i>. By calculating the sensitivity and specificity, the authors have used the data of all patients with a positive stress-echo, and did NOT exclude the two patients with the false positive stress-echo. Throughout the text, CAD should read positive exercise stress echo, not CAD.</p> <p>2. hs-CRP levels are usually expressed as mg/L, not mg/dL! A cutoff of 3 mg/L, not 3 mg/dL is normally used to discriminate high from intermediate CVD risk. Values of 1-4 mg/dL are considered to indicate mild inflammation. So please check data on hs-CRP for the proper units in Tables 3 and 4, and add the proper unit in the abstract, lines 17 and 18, and where hs CRP levels are mentioned in the text.</p> <p>3. Table 5 cannot be right, as only 73 patients were included in the study whereas numbers add up to 90.</p> <p>4. Throughout, the authors keep on calling parameters different where they are not, i.e. not significantly different. Please correct this in the lines 108, 109, 112, 113, 116, 181, 187, 189, 191.</p>	<p>Thank you for the evaluation</p> <p>I have tried to make appropriate changes as per the recommendations</p> <ol style="list-style-type: none">1. Unit of hs-CRP has been corrected2. CAD is replaced by positive exercise echocardiography and Non-CAD by negative exercise stress echocardiography wherever applicable3. Table 5 has been corrected4. Test of significance is considered before mentioning any parameter difference