



SDI Review Form 1.6

Journal Name:	<u>Cardiology and Angiology: An International Journal</u>
Manuscript Number:	Ms_CA_22969
Title of the Manuscript:	Haemodynamic Responses to Tobacco Smoke Inhalation in Male Adolescents in Lusaka, Zambia
Type of the Article	Original research Articles

General guideline for Peer Review process:

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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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	The article is aimed to determine the acute effects of tobacco smoke on hemodynamics in black male adolescents in Lusaka, Zambia. The title is "Haemodynamic Responses to Tobacco Smoke Inhalation in Male Adolescents in Lusaka, Zambia". I have some questions. The authors should to clarify and add the following issues in the text. 1. The sample size of the study is relatively small.	1. The sample size was estimated using the following formula; $N = (Z_{\alpha/2})^2 s^2 / d^2$ Which considers a single subject design approach where - N is the sample size - s is the standard deviation of means of PWV (rba) in smokers and a control group in a study on effects of smoking on PWV by Hee Sun Koo et al. 2007 study (27.2). - d is the accuracy of estimate or how close to the true mean which can also be noted as the difference between the means (SBP in smokers and a control group in a study on effects of smoking on PWV by Hee Sun Koo et al. 2007 study (58)) $Z_{\alpha/2}$ is the normal deviate for a two- tailed alternative hypothesis at a level of significance noted as 1.96. N calculated = 18 We do, however realise the limitations of such a sample size and have included that in our conclusion, stating the following; "Confounders such as blood nicotine concentration that are subject to puff volume, depth of inhalation, rate of puffing and type of tobacco may call for a larger sample sized study. This would increase the power of analysis and give more insight into the acute physiologic and non-physiologic hemodynamic responses to tobacco smoke inhalation...." 2. This is not a retrospective study. It is an observational study with an experimental design that documents observations in the same individual – before, during an event and after. Thus



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	2. This study is also a retrospective study. 3. Several factors influence the outcomes of the study. Some limitations might be occurred. 4. There was a wide variability of smoking parameters including number of cigarettes smoked per day, duration of smoking and the starting age of smoking. 5. Please add the limitations of the study in the discussion section. 6. The clinical application of the study is very important. The authors should to recommend the readers "How to apply this knowledge into routine clinical practice".	each participant acts as an own control. 3. We agree with the reviewers that there are definite limitations in this study but we consider the findings as indicative of need further research. 4. This being an observational study for physiological parameters with before and after observations, with each candidate acting as own control, mitigates for a lot of confounders. However, the need for triangulation of results cannot be overemphasized. We take this as a small component of larger and more robust studies to be catalysed by the dissemination. The white coat influences have been acknowledged in the main text. 5. Limitations are in text in the conclusion (2nd paragraph) 6. The following statement has been added to emphasise on the clinical importance of the study; "As the methods used in this study are simple and reproducible, parameters used in this study may be a useful tool to assess the effect of smoking and also for screening the risk of CVD in adolescents as part of routine clinical procedures"
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		