



SDI Review Form 1.6

Journal Name:	Cardiology and Angiology: An International Journal
Manuscript Number:	Ms_CA_35807
Title of the Manuscript:	Carotid intima-media thickness and risk of cardiovascular disease among healthy adult volunteers in north eastern Nigeria
Type of the Article	Original Research Article

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 <i>(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)</i>
Compulsory REVISION comments	1. Authors should discuss about possible reasons why carotid intima-media thickness is correlated with age, SBP and other factors that were found in the present research, discuss about the possible mechanisms of such correlations 2. From the text it is not clear, why the carotid intima-media thickness assessment is important for cardiovascular risk determination. In the current form of results presentation CIMT seems like just one more method for risk assessment. Taking into account that we have a lot of such methods, the doctors can ask you: "And why should we use CMIT as a risk factor?" I think that authors must explain the advantages of this method compared to other ones – it is going to lead to increasing of practical importance of their work.	The manuscript is not intended to be mechanistic, but provide information of CIMT in our population. Mechanisms are referenced in the discussion and highlighted. The relevance is highlighted in the second paragraph of the introduction. And the justification particularly in those with intermediate risks mentioned.
Minor REVISION comments	1. In Introduction authors mentioned "...but 56 most of the studies centred on subjects with defined cardiovascular risk factors (11-14). We sought to determine CIMT and its association with other cardiovascular risk factors...". I have checked the references 11-14 and found, that in the present manuscript authors studied the same factors that other researchers (like hypertension in articles from references list and blood pressure in the present paper). If it is so, authors should rewrite these sentences, or explained what they meant in "define factors" and "other factors" more detailed. 2. In the Tables 1-4 authors should explain what values they put in and out of brackets.	The population are not the same. We studied apparently healthy people as mentioned in the methods section. The findings of associated risk factors was the first diagnosis. Others studied population with established risks. Bracket issues sorted out
Optional/General comments	The manuscript entitled "Carotid intima-media thickness and risk of cardiovascular disease among healthy adult volunteers in north eastern Nigeria" is aimed to the important problem of individual cardiovascular risk assessment. It should be noticed that the investigation was performed in Nigerians and it is very interesting because this group of people is not well studied in the context of cardiovascular risk.	