Reviewer Comments	Author Response
Reviewer's code: 00214291 Comments: interesting	The authors thank the reviewer for their interest
Reviewer's code: 00506608 Comments: RIPC is an extremely interesting and evolving topic in cardiac surgery. The risks appear to be minimal, but the benefits are unclear. Although this study appears to be a negative trial - the experiences of this Investigators is important to the overall understanding of both POAF and RIPC. I think the manuscript is very well written and organized. While there is always something that can be suggested to make a manuscript better - I think this manuscript is appropriate as it is. Clearly, they have put a lot of time and effort into this trial and manuscript preparation.	The authors thank the reviewer for their comments and encouragement.
Reviewer's code: 00227375 Comments: This is an interesting manuscript about the effect of remote ischemic preconditioning (PIPC) on clinical outcomes such as post-operative atrial fibrillation (POAF), myocardial infarction, stroke, and mortality in 102 patients undergoing cardiac surgery. The data demonstrated that PIPC did not reduce POAF. In addition, there were no significant differences in post-operative myocardial infarction, stroke, and mortality between RIPC group and control group. Therefore, the authors have suggested that further evaluations of RIPC are required to decrease post-operative events. The primary criticism of this study may be negative finding and small sample size. Of course, I understand that the authors describe these matters in study limitations. However, this study is a prospective, single-blinded, randomized controlled trial, so I think it is valuable. And this manuscript is nicely structured and well written. The following are my comments. (Comments) 1. References [10] Correct "Ischemia Research", "Education Foundation" and Research Group". [32] No. 32 is the same as No.33.	The authors thank the reviewer for their insightful comments. Correction has been made to reference 10. Reference 33 has been deleted and all other references have been renumbered. We apologize for the oversight.
Reviewer's code: 00505578 Dr. Lotfi and colleagues presented a prospective RCT aiming to determine whether remote ischemic preconditioning reduces the incidence of postoperative afib in cardiac surgery. While the hypothesis is solid, the study suffers from heterogenous case mix despite RCT design. This may simply be a type II error. However, given the	The authors thank the reviewer for their insightful comments. We acknowledge the limitations of this study including the sample sample size and it's related issues, particularly the heterogenous case mix.

relatively small numbers, it seemed as though there were more complication in the treatment group which also included more valve patients. Your incidence of postop afib is quite high so is your LOS. Pls reconcile...	The slightly higher rates of POAF and LOS seen in our study may be reflective of this sample size as well. Unfortunately, due to lack of funding for this study, a larger sample could not be enrolled which may have less limitations. Therefore, reconciling the obtained results would be very challenging for us at this stage.