

PEER-REVIEW REPORT

Name of journal: World Journal of Cardiology

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Title: Impact of Cardiologist Intervention on Guideline-Directed Use of Statin Therapy

Reviewer's code: 03650328

Position: Editorial Board

Academic degree: FRCP (C), MD, MSc

Professional title: Assistant Professor

Reviewer's Country/Territory: Canada

Author's Country/Territory: United States

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Reviewer chosen by: Jin-Zhou Tang

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|---------------------------------|---|
| Scientific quality | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| Language quality | <input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection |
| Re-review | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Peer-reviewer statements | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

SPECIFIC COMMENTS TO AUTHORS

In this retrospective cohort study, Cassagnol et al. examined the impact of cardiologist intervention (compared to a general internist) on statin therapy in an outpatient setting.

The authors found that more patients seeing a cardiologist were prescribed a statin but appropriate intensity of the prescribed statin did not differ between groups. Comments:

1. Patients are seen in an Internal Medicine clinic but the authors conclude that statin therapy is appropriately managed by a “general practitioner”. I think GP refers more to family medicine practitioners, I would say that the comparison is between cardiologists and general internists. 2. The other major issue I have is the use of the word adherence. For example, in the Abstract, the authors state that they “aimed to examine the impact of cardiologist intervention on adherence to GDST in the ambulatory setting” This makes it sound like they are evaluating patient adherence but the authors are comparing prescribing patterns of a generalist clinic to a specialist clinic. The language needs to be clarified throughout the manuscript so that this is clearer. The title nicely reflects the goal of the study. Consider replacing ‘adherence’ with ‘use of’. Another example is in the Discussion on page 7, “adherence to GDST in patients seen by general practitioners tended to be lower...”. This could be rephrased as “adherence to GDST by GPs tended to be lower...” 3. Include SD of patient age in Abstract 4. Please clarify how patients seen by both IMC and CC were categorized. The sentence on page 4, “visit data was recorded if the referenced lipid panel was shared by IMC visit” is not clear. 5. On pages 4-5, the assignment of adherent vs. non-adherent and high intensity vs. moderate intensity could be clearer. 6. In Table 2, should all of the 211 patients seen in the IMC and 57 patients seen in the CC clinic have been on statins? i.e. is the denominator correct?