Dear reviewer,

We have studied your comments carefully and have made correction. Detailed revision was shown as follows. The changes to our manuscript were aslo highlighted by using red colored text in marked version. The marked version and the clean version have been uploaded at the same time. We hope these will make it more acceptable for publication.

Response to Reviewer #1

(1) As a preliminary step, I would exclude the study by Yong 2014 as there was zero occurrence of each of the six conditions considered in both treated and control, and explain why the exclusion was made.

Response:Yong 2014 has been removed as requested and explanations are given in the section of "study selection and quality assessment". In addition, all figures and tables have been modified accordingly.

(2) I note that it is listed both in the high vs placebo and in the high vs moderate intensity groups (is that right?) and that in the non-fatal MI high vs moderate meta-analysis output it is stated to have zero, not 20 patients in each group!

Response: Yong 2014 has been removed as requested and we apologize for the error of data entry.

(3) I would also not present meta-analyses for conditions with an extremely low occurrence. This is certainly true for cardiac death – only one case in nine studies.

Response: Endpoint event for cardiac death was briefly mentioned in the section of "study selection and quality assessment" without giving meta-analyses.

(4) I would have thought that results for some of the other endpoints could be briefly mentioned in the text without giving meta-analyses.

Response: We are sorry to say that we are not sure which endpoints need to be briefly mentioned in the text. Could you be a little more specific, please?

(5) Do not give meta-analyses results for different endpoints side by side, as in Figure 2. The print size is then so small as to be unreadable to human eyes!

Response: We have adjusted the arrangement of the Figure 2 and presented meta-analyses results for different endpoints separately

(6) Most importantly, the presentation of the results could be much simplified by first limiting attention to studies comparing treated (high intensity) with placebo or no statin, giving their results in one figure, then giving results for studies comparing high intensity vs moderate intensity giving their results in a second figure, and pointing out that these data virtually all come from one study. One could then have a final section noting that the results for the two outcomes with substantial data (MACE and non-fatal MI) differ widely between the two types of statin, so should not be combined. This presentation would make the results much easier to explain and understand.

Response: We have shown the results by comparing treated (high intensity) with placebo or no statin, giving their results in one figure in MACE. Then giving results for studies comparing high intensity vs moderate intensity giving their results in a second figure in MACE.

However, there are only one study comparing high intensity vs moderate intensity in non-fatal MI after the removal of Li 2013. Due to the limitations of the included literature, it was difficult to perform meta-analysis between high-intensity statin group with placebo or no statin group or moderate-dose statin group in non-fatal MI. Therefore, we compared intensive statin therapy and non-intensive statin therapy for this endpoint.

(7) Please omit from meta-analysis outputs studies with zero response in both treated and control.

Response: Yong 2014 has been removed completely in six conditions from meta-analysis. Li 2013 has been removed in non-fatal myocardial infarction. Wang

2013 has been removed in TVR.

(8) Abstract – methods – line 6:　　Start sentence "Random effects and fixed effect model were …..". (Note that it is fixed effect not fixed effects – there is only one effect!)

Response: It was modify to "Random effect model and fixed effect model were …".

(9) Abstract – results:I would rewrite completely from the second sentence up to the last but one.

Response: Rewritten as follow as required.

"11 studies involving 3,123 individuals were included．Compared with patients receiving placebo or no statin treatment before surgery, intensive statin treatment was associated with a clear reduction of risk of MACE (RR=0.44, 95% CI: 0.31-0.61, P<0.00001). However, compared with the patients receiving modest-intensity statin before surgery, no advantage to intensive statin treatment was seen (RR=1.04, 95% CI: 0.82-1.31, P=0.74). In addition, no significant difference was observed between intensive statin therapy and non-intensive statin therapy on the incidence of non-fatal MI (RR=0.54, 95% CI: 0.33-0.88, P=0.01), TVR (RR=0.43, 95% CI: 0.18-1.02, P=0.06) ,myalgia/myasthenia (RR=1.35, 95% CI: 0.30-5.95, P=0.69) and abnormal ALT (RR=1.47, 95% CI: 0.54-4.02, P=0.45)."

(10) Abstract – conclusion:　　Replace "benefit" by "difference".

Response: Modified as required.

(11) Core tip: This could be rewritten similarly to the above. As written it is very difficult to understand.

Response: Rewritten as follow as required.

"As the cornerstone of primary and secondary prevention of arteriosclerotic cardiovascular disease (ASCVD), statins have been widely used in clinical practice. However, whether intensive statin therapy before PCI could benefit the Chinese population remains debatable. A meta-analysis was performed to evaluate the efficacy

and safety of the strategy. The results showed that compared with placebo or no statin pretreatment, Chinese patients receiving intensive statin therapy before PCI could further reduce the incidence of MACE. In addition, there was no significant benefit on using high-intensity and moderate-intensity statin therapy."

(12) Introduction – line 5: Replace "which has also" by "and also".
Response: Modified as required.

(13) Introduction – near end: The word "troubled" is strange. Is "affected the general" better?
Response: Modified as required.

(14) Search-strategy – line 7: "It is worth mentioning ….."
Response: Modified as required.

(15) Last line below results: "the department ….."
Response: Modified as required.

(16) First line of results: Space after "Figure 1,".
Response: Modified as required.

(17) Fifth line of results: "1,544" not "1544".
Response: Modified as required.

(18) Effectiveness analysis – line 3: Delete "that was".
Response: Modified as required.

(19) Discussion – paragraph beginning: "An important finding ….." should be "an important finding is" not "was".
Response: Modified as required.

(20) Fourth line of same paragraph: Surely one benefits from the high-intensity therapy and not from receiving placebo!!! This needs rephrasing.

Response: Modified as required.

(21) Conclusion – lines 2 and 3:   Replace "would further reduce the" by "have a reduced".

Response: Modified as required.

(22) Conclusion – lines 2 and 3:Replace "would further reduce the" by "have a reduced".

Response: Modified as required.