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OPEN PEER REVIEW

Predictors of Smoking Resumption After Acute Coronary Syndrome: A Prospective Study in Western Iran

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About this report

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1 Original submission

4 comments · 17 Jan 2021 – 13 Feb 2021

Referee 1 Reviewer

MAJOR REVISION 17 Jan 2021

I would like to thank you for inviting me to review the manuscript. This subject is scientifically and practically valuable. The overall structure of the article is well organized. Nevertheless, there are some fundamental flaws to be considered.
Major issues:
1. The “Introduction” section must include: “What we know”, “What we don’t know” and “Aims”. In this article, the introduction is full of extra details and does not highlight the importance of the article.
2. The “Conclusions” section does not rise to the level of a conceptual advance. The conclusion should briefly describe the implications of the study, followed by recommendations for future studies.
3. Finally, I suggest that the manuscript be proofread by a native English speaker or an editing service. For instance, the word “subgroup” (in Tables 1 & 2) should be replaced with “categories”.
Minor issues:
Please make the following edits:
1. In the “abstract” and “results” sections, please replace “(μ ± SD)” with “(M ± SD)”.
2. In the “discussion” section, please replace “79.3%” with “78.3%”.
3. In the “materials and methods” section, please describe the psychometric properties of the instruments used in the current study (i.e., Cronbach's alpha observed in the present study for all measures).
4. Please write the reference list in Vancouver style. The journal names should be based on PubMed. In addition, DOI and PMID must be provided separately for each reference.
5. Under the ethical consideration subheading within the section “materials and methods”, please provide the code of ethics in research.
6. Please use the Iranian rial as the currency in all sections of the article.

Referee 2 Reviewer

MINOR REVISION 13 Feb 2021

Dear author,
Report the reliability of the checklist.
Delete table 1 and report its contents only in the text.
Report the predictive power of the variables and complete the regression table.
regards,

Associate Editor

MAJOR REVISION 13 Feb 2021

Dear author,
Highlight the changes in the main file.
Respond fully to the comments one by one in the reply-to-reviewers file.
Comment 1: …
Response 1: …
Reconsider the limitation, conclusions, ethical considerations, and footnotes.
Regards,

Editor-in-Chief MAJOR REVISION 13 Feb 2021

major revision

2

Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear reviewer

First of all, we appreciate you for review process of our manuscript titled "predictors of smoking resumption after acute coronary syndrome: a prospective study in western Iran" and your best suggestions. We completely checked your comment and performed them point by point. Furthermore, we explained revision process for you in the following statements. We highlighted the changes with yellow color in the main text.

Reviewer comment	Response
I would like to thank you for inviting me to review the manuscript. This subject is scientifically and practically valuable. The overall structure of the article has been run well. Nevertheless, there are some fundamental flaws to be considered. The “Introduction” section must be included: “What we know”, “What we don’t know” and “Aims”. In this article, the introduction is full of extra details and does not highlight the importance of the article.	Our title is: Predictors of smoking resumption after acute coronary syndrome: a prospective study in western Iran. Therefore, in the first paragraph, we described ACS. In second paragraph, we described the adverse effects of smoking on cardiovascular diseases. In third paragraph, we described the health benefits of smoking cessation. In fourth paragraph, we described many of patients resume smoking within a short time after hospitalization. What we know: ACS is a main health problem (first paragraph). Smoking has the adverse effects on cardiovascular diseases e.g. ACS (second paragraph). Smoking cessation decreased the risk of cardiovascular diseases (third paragraph). We know many of patients resume smoking within a short time after hospitalization (fourth paragraph). What we don’t know: there are many personal, epidemiological, psychosocial, and clinical factors that affect patient's attempts to quit smoking (fourth paragraph). Aims: This study was aimed to determine the predictors of smoking resumption after ACS in western Iran.

“Conclusions” section does not rise to the level of conceptual advance. Conclusion should be briefly described the implications of the study, followed by recommendations for future studies.	We corrected.
Finally, I suggest that the manuscript is proofread by a native English speaker or Editing service. For instance, the word “subgroup” (in Tables 1 & 2) should be replaced with “categories”.	We sent manuscripts to our international colleague in USA for proofreading. Although we cleaned the full text for you, if you read manuscripts, will see clearly.
In “abstract” and “results” sections, please replace “(μ ± SD)” with “(M ± SD)”.	We corrected.
In “discussion” section, please replace “79.3%” with “78.3%”.	We corrected.
In “materials and methods” section, Please describe the psychometric properties of the instruments used in the current study (i.e. Cronbach's alpha observed in the present study for all measures).	The Reliability of the concern questionnaire was also measured using Cronbach's alpha coefficient (0.81)
Please writing references list in Vancouver style. The name of journals should be based on PubMed. In addition, doi and PMCID must be provided separately for each reference.	We corrected.
In ethical consideration as the subheading within the section “materials and methods”, please provide the code of ethics in research.	We corrected.
Please mention the currency in all sections of the article in Iranian rial.	We corrected.
Mention the amount of reliability of the checklist	We corrected.

Delete the table 1 and report them just in text.	We corrected.
Express the predictive power of the variables and completed table of regression.	To evaluate the fit for multivariate regression, the Hosmer-Lemeshow goodness of fit test used. The Hosmer-Lemeshow chi-square value was 5.953, p-value= 0.063. This result shows a suitable fit of the multivariate logistic regression model for predicting smoking resumption after ACS.

2 Revision 1

1 comment · 2 May 2021

Editor-in-Chief

ACCEPT 2 May 2021

accept