Letter to the Editor

Response to letter by Chen and colleagues☆

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ARTICLE INFO

Dear Editor

We appreciate the interest of Dr. Chen concerning our article [1].

First, he asked whether selection process lead to any bias. Our study was intentionally done in chronic patients. Indeed, most severely ill patients died between qualifying acute event and baseline visit (average ≈1 year); all-cause mortality was during follow-up "only" 3.6% per year, while >50% of non-responders died before being included into follow-up. However, response rate to baseline interview was fair (>80%) and follow-up details were unavailable in <1% subjects. To our opinion, this selection bias paradoxically strengthens our results, because only really stable patients were included.

Second, the colleague asked for details about antiplatelets. About 88% of our coronary and 70% of post-stroke patients were chronically treated with aspirin, *plus* another ≈6% and 19% alternatively with war-farin; this means that 92% of patients were treated either with antiplatelets or with anticoagulants. We exploratory added also these treatments into regression model, but our results remained virtually uninfluenced.

Third, it was recommended to prove the tested association separately among WHO-based [2] body mass index (BMI) and age categories. In patient with BMI 25–29.9 we observed slightly better predictive power of low miR-19a in terms of all-cause mortality [HRR 2.50 (95% CI's: 1.39–4.48)], than in those with BMI ≥30 [HRR 1.82 (95% CI's: 1.00–3.31)]. Similarly, we also observed higher predictive power in patients aged ≤65 yr [HRR 2.45 (95% CI's: 1.36–4.42)] than in older ones [HRR 1.60 (95% CI's: 1.05–2.42)]. However, no significant interaction, neither with BMI nor with age was found again.

Declaration of Competing Interest

None.

References

[1] O. Mayer Jr., J. Seidlerova, V. Cerna, A. Kucerova, J. Vanek, P. Karnosova, et al., The low expression of circulating microRNA-19a represents an additional mortality risk in stable patients with vascular disease, Int. J. Cardiol. 289 (2019) 101–106.

[2] C.L. Parr, G.D. Batty, T.H. Lam, F. Barzi, X. Fang, S.C. Ho, et al., Body-mass index and cancer mortality in the Asia-Pacific Cohort Studies Collaboration: pooled analyses of 424,519 participants, Lancet Oncol. 11 (2010) 741–752.