NURSING RESEARCH REVIEW FORM
1st Review

Manuscript # 2006/036
Manuscript title: Symptom clusters in acute myocardial infarction: A secondary data analysis
Manuscript type: Regular
Number of text pgs.: 14
Number of figures: 1
Number of tables: 4
Reviewer: Laura L. Hayman, PhD, RN, FAAN
Stat reviewer assigned?: No -- do you recommend a stat reviewer?

Please evaluate the following with these choices: (1) adequate, (2) inadequate (describe in written review) or (3) not appropriate (describe in written review)

Problem statement: 1
Attention to relevant literature: 1
Theoretical framework: (implicit); This is not viewed as a limitation.
Research design: 1
Data analysis: 1
Discussion of results: 1 (see attached for additions)
Organization: 1
Writing style: 1

Please rate the following topics 1-5 (with 5 being the highest rating):

Value of topic: 5
Probable reader interest in topic: 4+
Importance of present contribution to nursing: 4+
Priority of topic for publication: 4+
Rank this manuscript for its value: 4+

Reviewer’s Recommendation (please type “X” after your choice):

Accept without revisions
Accept with revisions XX (minor)
Maybe accept with revisions
Do not accept
Please provide a comprehensive and integrated review of this manuscript. Be sure to present a balanced view of the manuscript's strengths and weaknesses.

Comments for Authors:

This well-written manuscript addresses an extremely important and timely topic relevant to treatment of individuals with acute myocardial infarction (AMI). Data indicate that early recognition of AMI symptoms and reduced time to treatment will decrease morbidity and mortality. Less data are available on how to influence patients' ability to recognize AMI symptoms. The purpose of this secondary analysis of nine descriptive cross-sectional studies (n=1073 participants) was to address this goal.

In addition to the significance of this research, strengths include the review of recent relevant literature with clear rationale supporting the need and potential significance of the results for providers and patients. The clarity of writing style and organization and logical flow of ideas is noteworthy. The innovative (latent class cluster analysis) approach to data analysis, as applied in this study, adds to the information yield on symptom clusters and is viewed as a methodological strength. The inclusion and exclusion criteria are clearly provided, justified, and appropriate for addressing the major aim.

The authors acknowledge methodological limitations relevant to secondary analysis of multiple sources of data. The method used to develop a master data base, for example, addresses one of these issues and was designed to enable analysis of variables across sources/sites. More detail on the method of interviewing participants (page 6) should be added particularly since the authors note that the approach added to the reliability and validity of the data. The rationale for using latent class cluster as opposed to other data analytic techniques is given. The details of application to this data set are also clearly provided. The addition of a legend to the table (Table 3) would be helpful for those readers not familiar with these innovative analyses. Elaboration of the implications of this study for healthcare providers and patients and addition of more specific directions for future research in this important area of research is suggested.