

## Peer Review File

**Article Information:** <http://dx.doi.org/10.21037/atm-20-3962>

This a study on the effect of statin treatment on the difference between lipid values in the fasting vs non-fasting state. Although of interest, several issues should be addressed:

**Comment 1:** Was this study prospectively designed? What was the exact protocol? Which day of hospitalization were the measurements performed? Were fasting vs non-fasting measurements performed at the same day in each patient?

**Reply 1:** Thanks for reviewer's questions. In fact, the study was prospectively designed for the purpose of examining the differences between fasting and non-fasting lipid profiles. However, the current study was a post-hoc analysis examining the effects of statin on the accuracy of non-fasting lipid test. The protocol of the study was presented in the Method part of the revised manuscript. Both fasting and non-fasting lipid tests were performed on the second day of admission.

**Changes in the test:** We have added more detailed description in Study population of Method part (see Page 5, line 116-117; Page 6, line 134-137).

**Comment 2:** Page 3; line 61: Please provide appropriate references

**Reply 2:** Thanks for reviewer's kind suggestion. We have provided appropriate reference in the revised manuscript.

**Changes in the test:** We have changed the reference (see Page 15, line 345-346).

**Comment 3:** Why patients on low- and high-intensity statins were excluded?

**Reply 3:** Thanks for reviewer's kind question. We enrolled patients with moderate-intensity statin therapy due to the following reasons. Firstly, the percentage of patients with low- and high-intensity statins was small (3.9%). Second, Chinese patients were initially and routinely prescribed with moderate-intensity statins according to Chinese guidelines.

**Changes in the test:** No change.

**Comment 4:** Page 5; line 109: Please capitalize first letter

**Reply 4:** Thanks for reviewer's kind reminder.

**Changes in the test:** We have capitalized first letter (see Page 6, line 141).

**Comment 5:** Page 5; line 111: TG<150 (not 200) are defined as ‘normal’ TGs

**Reply 5:** Thanks for reviewer’s kind and scientific comments. We did have the misuse of the description of normal TG. We reconfirmed this definition and defined TG above 200mg/dL as hypertriglyceridemia according to American Heart Association (AHA) and Chinese Medical Association guidelines.

**Changes in the test:** We modified ‘normal’ description in Page 6, line 143-144.

**Comment 6:** Did authors measure Lp(a) levels?

**Reply 6:** Thanks for reviewer’s kind suggestion. We measured Lp(a) levels of individuals during admission.

**Changes in the test:** We have added Lp(a) levels in Table 1.

**Comment 7:** Authors measured LDL-C by a direct assay. However, this is not the case in clinical practice worldwide. They should also report analyses based on Friedewald-derived LDL-C.

**Reply 7:** Thanks for reviewer’s kind suggestions. We further analyses the Friedewald-derived LDL-C.

**Changes in the test:** We added the analyses of calculated LDL-C in Table 2, 3, 4.

**Comment 8:** Are there data on the type of breakfast offered, i.e. percentage of fat?

**Reply 8:** Thanks for reviewer’s comments on this important issue. In our study, all patients ordered a hospitalized breakfast which contains similar calories but different kinds of food. Unfortunately, we have no information concerning the amount of fat.

**Changes in the text:** No change.

**Comment 9:** 74.3% of patients in the statin group continued statin treatment, while 39.6% of the non-stating group initiated statins. I am totally confused with this statement. When the measurements took place? Were all statin-group patients on statins at the time of measurement? Were all non-statin group patients off statins?

**Reply 9:** Thanks for reviewer’s kind and scientific comments on these several issues. In fact, the patients in the statin group were defined as individuals who were prescribed with statins before they were admitted to hospital. Likewise, patients in the non-statin group were not prescribed statins before admission. The percentage of statin prescription shown in table 1 were the statin treatment during hospitalization after the measurement of all lipid profiles. We deleted the

description regarding “non-statin group initiated statin therapy” to avoid the confusions according to reviewer’s suggestion.

**Changes in the text:** We deleted the relevant statistics in Table 1 to avoid misunderstanding about our study.

**Comment 10:** Reference #10: Journal?

**Reply 10:** Thanks for reviewer’s kind reminder.

**Changes in the text:** We modified the reference in the revised manuscript (see Page 15, line 365).

**Comment 11:** Tables: p values for change within each group should be reported.

**Reply 11:** Thanks for reviewer’s kind reminder.

**Changes in the text:** We added p values for change in Table 2, 3, 4.