Review of: "Six Months of Remote Patient Monitoring is Associated with Blood Pressure Reduction in Hypertensive Patients: An Uncontrolled, Observational Study"

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Potential competing interests: No potential competing interests to declare.

This is an overall interesting and important study. It is informative as a data exploration but would need a better study design and more comprehensive data analyses to provide stronger evidence.

Below are my suggestions:

1. People selected in the study are more likely to be those who were concerned about their health and thus decided to enroll in the RPM program (selection bias). They may also take other medications that help with reducing MAP. Ideally, this study should be carried out as an RCT (recruit patients and randomly assigned patients into control and treatment groups)

2. Given the current study design, it would be good to at least examine and provide baseline patient demographic information (age, sex, race, SES, health conditions, etc.) to compare if the people included in the study have similar characteristics with people who generally need to use the service to control their MAP

3. When comparing different groups, it is always important to control for potential confounders. Ideally, the author should run regression models, with confounders controlled for. One possible way is to put pre-test MAP, group assignments, and patient characteristics into X and post-test MAP into Y.

4. I would also be interested in seeing the test of the interaction effect between MAP quartile and monitored days (i.e., to examine if people with higher baseline MAP benefit more from longer monitored days). A plot to show the potential interaction effect would be helpful.

Looking forward to more work done for this study!