

Thanks for valuable comments. Changes are highlighted in manuscript. Response to reviewers are as follows;

**Reviewer 1:**

This is a good manuscript which is highlighting a very important area.

**Reviewer 2:**

The article represents very interesting data according the prospective study performed in Pakistan. The main idea of the study was that despite the difficult economic state it is possible to provide necessary basic information about education and diabetes care.

**The authors should include the information about the percentage of patients who received free coverage for insulin and glucose testing equipment.**

**Response:** All registered subjects with T1D were provided free coverage for insulin and glucose testing equipment.

**It would be great to provide more detailed information about the glycaemic parameters before and after the observation period (it would be better to provide the data in the table).**

**Response:** The detailed information about glycemic parameters before the observation period was not included. However, detailed information about glycemic parameters were assessed by checking HbA1c, FBS and RBS at baseline and end of the study along with self-monitoring blood glucose level (SMBG) during 3 years follow up.

### **Reviewer 3**

An important study showing that in a resource poor environment it is possible to get money to provide community education about diabetes equipment, medication and personnel to look after patients with Type 1 diabetes and to improve glyceemic control.

**The feasibility of the project has been shown but not the costing. I would have thought that for acceptance of the methods used by other States/ countries some discussion of cost should be included.**

**Response:** All participants were given free of cost consultation, lab diagnosis, glucometers, insulins, strips, lancets and syringes etc. The annual cost per participant was 61000pkr (436USD), per month 5083pkr(36USD) and per day 169pkr(1.2USD), added in discussion.

**What percentage of patients at the start of the study had free insulin and blood sugar testing equipment?**

**Response:** No single patient had free insulin and blood sugar testing equipment at the start of the study.

**Baseline demographic and clinical data are given in Table 1. A table for fasting blood sugar and HbA1c for the end of study would be helpful, as would the numbers lost to follow up.**

**Response:** All the study participants during the study duration were coming to their respective medical centers for the required care. However, in remote areas the follow-up HbA1c was not completely available. Table for comparison of HbA1c and fasting and random blood sugar from baseline to end of study is added.

**The article suggests a three year follow up but table 3 only goes to Month 14-19. It is not clear what period recruitment started and ended and how many patients had a 3 year follow up.**

**Response:** Changes are made and highlighted in table 3, as it was a typo error.

**Handling the drop outs can distort the outcome. Thus, in the methods section this should be explained.**

**Response:** Added in limitation section.