

Reviewer #1

<p>This is well designed, performed and written survey study for the assessment of availability and use of insulin delivery devices and HbA1c testing in 41 less-resourced countries. This study was conducted in 2019 supported by the Life for a Child Program. This study is extension of previous study conducted in 2015. The authors conducted survey in 37 countries. The authors give a sufficiently clear overview about the study background and raised clearly the aim of the study, which is fulfilled. The material studied is large enough and allows to draw the conclusions. The Results are presented clearly and have been discussed well. The paper is supplied with 7 Tables and one Figure which give very good overview about the results and are presented very clearly and correctly. In addition, the authors present very accurate questionnaire. The authors found that public health systems in less-resourced countries are unable to provide access to appropriate injection devices and HbA1c testing for people with diabetes. This paper has also important clinical outcome because pay attention on possible recommendations for ameliorating the situation.</p>	<p>We thank the reviewer for these thoughtful comments.</p>
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Reviewer #2

<p>Abstract "There was inadequate public access to HbA1c testing aside from donated supplies, with substantial costs to patients" - I do not see any result to support this proposition.</p>	<p>We thank the reviewer for this comment. We have expanded the second paragraph in Section 3.2 to make this clearer, also see Table 6 with costs and availability.</p> <p>We have also edited the abstract to read "Aside from donated supplies, there was variable access to HbA1c testing within public health facilities, and, when available, patients often had to cover the cost".</p>
<p>Article The article is interesting but I have some comments: 1. Where does the term: "less-resourced countries"? Who made this classification of countries and in what year?</p>	<p>We appreciate that this term may be confusing. We are referring to countries that are Low-and-middle income countries (World Bank income classifications https://datahelpdesk.worldbank.org/knowledgebase/articles/906519-world-bank-country-and-lending-groups)</p> <p>Based on your comments, we have replaced the term "less-resourced country" with "low- and middle-income countries (LMICs)". This also includes revising the title.</p>
<p>In title put type 1 diabetes</p>	<p>We thank the reviewer for this suggestion. We agree this is a helpful addition and have altered the title accordingly.</p>
<p>To find out the cause of what you say in the conclusions, we must also know the prevalence of type 1 diabetes in these countries. Shows some data on the prevalence of diabetes before going into your analysis.</p>	<p>We thank the reviewer for this helpful suggestion. We have now added another appendix (E) which lists prevalence figures from the IDF Atlas 2019 for young people <19 years age in the countries surveyed in this study.</p>
<p>POCT is not the gold standard in HbA1c testing. Liquid chromatography is golden standard. If civilized countries have liquid chromatography for HbA1c testing, why would this technique not be introduced in these countries? See here: https://www.bio-rad.com/en-ro/product/d-10-instrumentation?ID=b69d270d-0aef-473f-ae33-439a56d9128f</p>	<p>We thank the reviewer for this comment, we should have worded this section better. We fully agree that gold standard in HbA1c testing is indeed High Performance Liquid Chromatography in a laboratory. However, Point-of-Care testing, giving an immediately available result, is recommended by the ISPAD Consensus Guidelines for diabetes in children and adolescents as preferable to laboratory analysis (with its delayed result). Please see reference 16 in the manuscript. We have appropriately edited the manuscript.</p>

Reviewer #3

<p>This report analyzed results of survey of 41 low income countries about important aspects of management of type 1 diabetes and derived a set</p>	<p>We thank the reviewer for these comments.</p>
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<p>of recommendations (in the Conclusions section) funded on the findings of the study. This report can be of use in future efforts to improve the management of type 1 diabetes in low-income studies. The methodology and overall reporting of the study are appropriate.</p>	
<p>I only have a suggestion for revision of two sentences: (a) The second sentence of the section 2.3 Analysis. Please revise the sentence "When prices, frequencies of HbA1C tests and insulin injections were reported as ranges, with the mean value was used for analysis."</p>	<p>We thank the review for noticing this syntax error. We have therefore revised the sentence to read: "When prices and frequencies of HbA1C tests and insulin injections were reported as ranges, the mean values were used for analysis."</p>
<p>(b) In the fourth paragraph of the Discussion, please revise the sentence "This especially an issue for younger children who may only be receiving does of a couple of units of insulin -".</p>	<p>We thank the review for noticing this syntax error. We have therefore revised the sentence to read: "This is especially an issue for younger children who may only be receiving a couple of units of insulin per injection."</p>