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Editorial Office Director, Company Editor-in-Chief, Editorial Office

**Baishideng Publishing Group Inc.**

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RE: Manuscript NO: 77827 **“Clinical Challenges of glycemic control in the Intensive Care Unit: A narrative review”**

Dear colleagues,

On the behalf of my co-authors, we appreciate the opportunity to revise and resubmit our manuscript. We have thoroughly reviewed and addressed your comments. You will find a point-by-point reply in the following pages.

We believe that it is a much stronger manuscript based upon the feedback and suggested changes. Thank you again for this opportunity and we look forward to hearing from you.

Kurt Ruetzler, MD, PhD, FAHA

**Specific Comments to Authors:**

**Reviewer 1:**

Dear authors, thanks a lot for having the opportunity to review your manuscript. Here are my comments: The title reflects the main subject of the manuscript, the abstract summarizes and reflects the work described in the manuscript. There are no keywords declared in the manuscript.

**Response:** Keyword have been added.

The manuscript adequately describes the background, present status and significance of the study. It is formed as a review of the current state of the art in clinical challenges of postsurgical diabetes admitted to the Intensive Care Unit. Experiments are not in the focus of the manuscript. The manuscript interprets the findings adequately and appropriately, highlighting the key points concisely, clearly and logically. The findings and their relevance to the literature are stated in a clear and definite manner. But there is no discussion of the topic and the conclusion is too short.

**Response:** The aim of this narrative review is to summarize current clinical approaches in the treatment of dysglycemia in patients admitted to the intensive care unit. We agree, that an extended and in-deep discussion is needed in scientific original papers, but we doubt that this is helpful in this current submission. The aim is to guide clinicians and offer clinical decision support, and both were adequately addressed in this submission.

The relevance to clinical practice is not really sufficiently, more aspects would give more benefit.

**Response:** We hope that this revised version is better suitable and does cover all relevant aspects of glycemic control in the ICU setting.

Table 1 is too small for showing the landmark studies.

**Response:** we submitted the updated version of the table 1 as a separate document. The size and readability should be improved.

Legend is ok. Obviously the manuscript cites appropriately the latest, important and authoritative references in the introduction and discussion sections.

**Response:** several additional references have been added.

Self-cites could not be found. Overall the manuscript is good organized and present, but I recommend to edit the crossover from one part to the next part of the manuscript, because sometimes it looks like a brick in the manuscript. Style, language and grammar is accurate and appropriate. Overall the manuscript is prepared as a Systematic review, but it would be a good way to bring the manuscript in a more conceptual way.

**Response:** we now specify in the title, that this submission is a narrative review. This submission follows the requirements of this type of submission.

Ethical approval is not necessary.

**Specific Comments to Authors:** This is a well written concise review, the authors need to reference wherever there is a mention of a study results.

**Response:** we added several additional references throughout the entire manuscript.

**Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.**

**Response:** this manuscript was written by physicians practicing in an US academic center, and all of them are fluent English speakers. A revision by a language editing service is therefore not needed.