

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Diabetes*

**Manuscript NO:** 88291

**Title:** Analysis of the influencing factors and clinical related characteristics of pulmonary tuberculosis in patients with type 2 diabetes mellitus

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 06519557

**Position:** Peer Reviewer

**Academic degree:** MD, PhD

**Professional title:** Associate Professor, Doctor

**Reviewer's Country/Territory:** Japan

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-10-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-11-03 03:29

**Reviewer performed review:** 2023-11-07 09:32

**Review time:** 4 Days and 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Diabetes combined with tuberculosis has become a major public health problem and the rising prevalence of diabetes is a potential threat to tuberculosis control. The study is set up correctly. Han Shi et al. clarify the characteristics of patients with T2DM-PTB and explore the risk factors of active tuberculosis in type 2 diabetes patients. The material studied allows to drawn the conclusions. The paper is written well, the Introduction give a good overview about the study background and the authors raised clearly the hypothesis of the study. It provide scientific basis for disease prevention and control. Comments/suggestions: 1. The article mentions that the group of patients with T2DM-PTB should be observation group. 2. I did not find any relevant information on the results of the habitual snoring (OR = 8.86, 95% CI: 1.99-39.45) mentioned in the abstract and text. 3. What does "2.3 Control is the most selected" mean? 4. In the section of 2.4 chapter, "2h glucose 11.1mol/L" should be "2h glucose 11.1mmol/L". 5. Sample size calculation should be numbered 2.5, and in addition, this part needs to be clarified. 6. Tables required a minor editing of footnotes. 7. A minor language editing is required.

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**Reviewer's code:** 06520378

**Position:** Peer Reviewer

**Academic degree:** BSc, PhD

**Professional title:** Assistant Professor

**Reviewer's Country/Territory:** United Kingdom

**Author's Country/Territory:** China

**Manuscript submission date:** 2023-10-30

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2023-11-01 07:52

**Reviewer performed review:** 2023-11-07 10:24

**Review time:** 6 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

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<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This study investigated the expression of the influencing factors and clinical related characteristics of pulmonary tuberculosis in patients with type 2 diabetes mellitus. The authors found that lymphopenia, smoking, history of TB exposure, poor glycemic control were independent risk factors for T2DM-PTB, and overweight and obesity were associated with reduced risk of concurrent PTB in patients with T2DM. Tables need to be re-examination: n-105 should be n = 105. In addition, it needs to be clear whether the presentation of data is mean  $\pm$  SD or n (%). In addition to this, some data in the results section is not seen presented in the tables, for example, habitual snoring, monthly income, household registration type, and medical reimbursement form, etc. There are some inconsistencies between the results and the table. For example, the proportion of high infection in the control group was 53.3%. But the figure in the table is 54.3%. the proportion of non-smokers in the control group was 50.5%, but the figure in the table is 50.0%, and so on. After revising the questions, the reviewer strongly recommended that the article be edited by the native English speaker before it was published.