

Response Letter to the Reviewers, Editors, and Staff Affiliated with F6 Publishing and the *World Journal of Cardiology* Regarding Invited Manuscript #05410414

From Dr. Mouhamed Nashawi MD et. al,

Please find attached a succinct, yet salient review of the reviewers and editor's suggestion for manuscript improvement to move our work towards publication status. The format of this response was a direct copy and paste of the suggestions addressed, and the response, course of action, or commentary to remediate or elucidate the suggestion for manuscript revision. We hope these changes are found to be appropriate. All changes have been reviewed and endorsed by the respective authors as a collective group.

1 Scientific quality: The manuscript describes a Review of the SGLT2 Inhibition and Phosphate Metabolism. The topic is within the scope of the WJC.

Response: We are thankful that the manuscript is deemed to be within the scope of the WJC

(1) Classification: Grade B;

Response: We are appreciative of the grading by the respective reviewer(s) and editor(s), and will modify the manuscript as mentioned above to accommodate the below requests.

(2) Summary of the Peer-Review Report: This review manuscript focusing on phosphate was very interesting and written well. Authors should add details about SGLT2i, calcium ion and other electrolytes serum. The questions raised by the reviewers should be answered;

Response: The authors of the manuscript take the compliments regarding the interesting nature and writing style of our manuscript with high regards and are honored by such compliments. To address the subsequent portion of this commentary, we have added more details about SGLT2i in the beginning as requested, adding roughly 480 words of content backed by citations of quality evidence to augment the review. We also included a new section entitled "SGLT2i and Other Electrolytes: An Annotation Towards Inclusive Insight in Pharmacodynamics". Which includes 1,480 words of content related to sodium, calcium, extended phosphate, and magnesium electrolyte dynamics within SGLT2i. The inclusion of this amended content to satisfy the reviewer resulted in increasing our citation count from 96 previously to 130, which represents increasing our relative citation count by over 1/3 to satisfy this prerequisite. These only include the articles that we deemed appropriate, and there were more than 34 total papers read to stratify which ones would be most appropriate. Given the editing time, and our schedules as healthcare providers in tandem with researchers, this resulted in reading more than one manuscript daily in conjunction with editing and accommodating the editor. We hope these changes satisfy the readership of the *World Journal of Cardiology*, as publication in this venue is very much anticipated as a positive for us.

(3) Format: There are 3 figures;

Response: We attest that there are indeed 3 figures in the manuscript.

(4) References: A total of 96 references are cited, including 32 references published in the last 3 years;

Response: Prior to revision, 96 references were included. However, to accommodate the reviewers request for a more comprehensive manuscript, the citation count has increased to 107.

(5) Self-cited references: There is no self-cited reference; and (6) References recommendations (kindly remind): The authors have the right to refuse to cite improper references recommended by the peer reviewer(s), especially references published by the peer reviewer(s) him/herself (themselves).

If the authors find the peer reviewer(s) request for the authors to cite improper references published by him/herself (themselves), please send the peer reviewer's ID number to editorialoffice@wjnet.com.

The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade B. The authors are native English speakers. 3 Academic norms and rules: No academic misconduct was found in the Bing search.

4 Supplementary comments: This is an invited manuscript. No financial support was obtained for the study. The topic has not previously been published in the WJC. 5 Issues raised:

Response: No improper suggestions were recommended and all the references cited in this article had indication in explaining the narrative we wished to communicate in our article and to promote a topic, as stated in this reference, that has not been published in WJC. Moreover, we are grateful for the invited manuscript and can attest no financial support was obtained for the study.

(1) The title is too long, and it should be no more than 18 words;

Response: We thank the *World Journal of Cardiology* community for raising this matter, and we have amended the title to become 17 words in length. It is now entitled, "Cardiovascular Benefits from SGLT2 Inhibition in T2DM Patients is Not Impaired with Phosphate Flux Related to Pharmacotherapy".

(2) The "Author Contributions" section is missing.

Please provide the author contributions;

Response: We thank the *World Journal of Cardiology* community for raising this matter, and we have amended the manuscript to include the author contributions in the beginning of the manuscript.

(3) The authors did not provide original pictures. Please provide the original figure documents.

Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

(4) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout; and

Response: We thank the *World Journal of Cardiology* community for raising this matter, and we have amended the manuscript to include the DOI numbers and the comprehensive author list.

(5) Please confirm if the figures are original. If an author of a submission is re-using a figure or figures published elsewhere, or that is copyrighted, the author must provide documentation that the previous publisher or copyright holder has given permission for the figure to be re-published; and correctly indicating the reference source and copyrights. For example, "Figure 1 Histopathological examination by hematoxylin-eosin staining (200 ×). A: Control group; B: Model group; C: Pioglitazone hydrochloride group; D: Chinese herbal medicine group. Citation: Yang JM, Sun Y, Wang M, Zhang XL, Zhang SJ, Gao YS, Chen L, Wu MY, Zhou L, Zhou YM, Wang Y, Zheng FJ, Li YH. Regulatory effect of a Chinese herbal medicine formula on non-alcoholic fatty liver disease. *World J Gastroenterol* 2019; 25(34): 5105-5119. Copyright ©The Author(s) 2019. Published by Baishideng Publishing Group Inc[6]". And please cite the reference source in the references list. If the author fails to properly cite the published or copyrighted picture(s) or table(s) as described above, he/she will be subject to withdrawal of the article from BPG publications and may even be held liable.

Response: We thank the *World Journal of Cardiology* community for raising this matter, and we can confirm that the images are original in nature. The corresponding author, Dr. Mouhamed Nashawi MD (myself), has created the images via a combination of Adobe Illustrator, Photoshop for hue augmentation, with text and arrows created by the author via digital illustration. The template of some components of the images were not created de novo, however, they are not used in their native form and have included some editing to accommodate the specific nature of the topic. These images are derived from Servier Medical Art. The platform advertises itself as a repository for gratis images for presentations, technical writing, etc. Per Servier Medical Art's intellectual property declaration on their website, they state verbatim, "in compliance with the terms of the Creative Commons Attribution 3.0 Unported License. Note that you are totally free to use Servier Medical Art images as you want"

6 Recommendation: Conditional acceptance.

Response: Thank you for the invitation to contribute to your journal. We hope upon showing transparent communication regarding the changes we have made via tracking, comprehensive answers listed in red, delineating changes clearly in the parent manuscript, and following every recommendation, we hope to complete formal publishing in *World Journal of Cardiology* via official acceptance as we are anticipating the response such acceptance will have on access to such an esteemed readership such that your platform has access to.