Reviewer #1: The manuscript describes the advantages of insulin glargin-300 over other basal insulins in the treatment of type 1 and type 2 diabetes. The topic of the review is relevant for clinicians involved in diabetes management. The review presents the latest results of randomized clinical trials (RCTs) and real-world evidence (RWE) studies of glargine-300. In general, the review adequately reflects the state of research in this area. The manuscript is written very clearly and consistently. From my point of view, the article can be published after some revision.

Query 1. Abstract is not very informative, as it does not contain new information. I would include a summary of specific data from RCTs and RWE studies

Response: we thank the reviewers for the comment. We have revised the sentences between lines 50-54 in the manuscript draft. In order to respect the restrictions in word count in the abstract, we have only kept the statements with RCTs and RWEs in the introduction and discussion sections.

Query 2. Core tips. The following phrase should be specified: "Glargine-300 (Gla-300), the second-generation long-acting insulin analogue, provides an extended and stable action profile, sustained glucose lowering, reduced risk of hypoglycaemia, less weight gain, and flexibility of dosing schedule" Advantages in comparison with what are meant here? The effect on body weight should be verified, since most studies have not shown such an advantage.

Response: We appreciate the reviewer comment. As we understand, the sentence is written to introduce the modern Gla-300 with the perspective of its safety and efficacy profile as compared to the first-generation basal insulin. Hence, we are of the opinion that the phrase should be intact as is. We have verified the statement on body weight and it is shown in patient-level meta-analyses of the EDITION 1, 2 and 3 studies (references 31 and 32). Hence, the statement is correct.

Query 3. The methodology for searching and selecting information for review should be described

Response: This is a very good suggestion. The methodology employed was a simple literature review of Pubmed using keywords such as "glargine 300", "insulin glargine 300", "gla-300", etc with salient CT data and reviews included in the outline. Since this is a literature review than a systematic review where search strings are part of the methods section, we are of the opinion that the search methodology may not be required for the article.

Query 4. The differences in the RCTs of insulin glargine-300 and degludec (BRIGHT and CONCLUDE) regarding the study design (first of all, inclusion criteria) and patient populations should be described in more detail.

Response:  We appreciate the reviewer's comment. We have adequately revised the manuscript with more detail on the study design and patients (manuscript lines 435-441; 480-487) inclusion/exclusion criteria.

Query 5. BRIGHT: it should be clarified to what period of the study the data in the last paragraph ("The event rates of hypoglycaemia (≤70 mg/dl) were lower with Gla-300...") refers

Response: This was during the titration period of first 12-weeks and now mentioned in the manuscript (line 450).

Query 6. The results of the studies comparing glargine-300 and degludec with the use of CGM: type of diabetes should be mentioned.

Response:  We appreciate the reviewer's comment. The studies comparing Gla-300 and IDeg with euglycaemic clamp were performed in patients with T1DM. The manuscript draft reflects the same between lines 167-175.

Query 7. Table 2. EDITION 3 study. The data look inconsistent: the figure 1.0% should be checked.

Response: In our opinion, Figure 1 serves an important role to visually illustrate the difference in MoA between Gla-300 and Gla-100 and hence, we would like to retain the same in the article.


Reviewer #2: The aim of the proposed review manuscript by Ghosh and Ghosh was to summarize the result of randomized clinical trials and real-world studies on the clinical efficiency and safety information on the second-generation basal insulin analogue glargine 300 U/ml (Gla-300) in patients with type 1 and 2 diabetes. Specific comments and recommendations: -

Query 1. The authors should re-formulate the title of the manuscript to represent the aim of the review

Response: We have revised the article title to: "A review of clinical efficacy and safety of second-generation basal insulin, Glargine-300 (Gla-300) for treatment of people with diabetes mellitus".

Query 2. In my opinion, Figure 1 is not needed, but it is entirely up to the authors' consideration.

Response: In our opinion, Figure 1 serves an important role to visually illustrate the difference in MoA between Gla-300 and Gla-100 and hence, we would like to retain the same in the article.

Query 3. When discussing various studies, the authors are not always specific on the demographics and the clinical characteristics of the individuals involved in these studies. This missing information to be included. Beside these minor comments, in my opinion, the review is in a good shape.

Response:

We appreciate the reviewer's concern. We understand that the demographics and relevant clinical characteristics are important information. Hence, we have mentioned the important information on patient population (like type of diabetes, key eligibility criteria, relevant patient profile, etc.) wherever applicable. The details reflected in the current updated draft substantiates the key clinical efficacy and safety aspects of the studies done in people with T1DM/T2DM.