

Response to Reviewers

The authors would like to thank the reviewers for their suggestions. They were read over carefully and appropriate changes to the paper have been made. The major revisions are highlighted in red in the text. We would like to thank the reviewers for carefully evaluating our paper to improve its quality. Below, please see the explanations of the changes we have addressed based on the recommendations.

Reviewer #1:

1. Urinary parameters such as albumin/creatinine ratio is missing for all participants/its important parameter.

Thank you for this suggestion. Unfortunately, we were unable to retrieve this information from the medical records of the patients selected for our study. This remains a limitation of our paper which we will try to address in further experiments.

2. EGFR calculation.

Thank you for this suggestion. We have added information regarding EGFR in the revised version of the manuscript, both for obese non-diabetic and obese diabetic patients. However, we did not find statistically significant correlations between EGFR and FORT or EGFR and FORD, as listed below:

$r_s = 0.02265, p$ (2-tailed) = 0.82125 for the FORT-eGFR correlation.

$r_s = -0.01123, p$ (2-tailed) = 0.91081 for the FORD-eGFR correlation.

3. Urinary metabolites of oxidative stress biomarkers?

Thank you for this suggestion. The CR3000 analyzer used in this study is only designed for blood samples. Urinary metabolites of oxidative stress biomarkers cannot be analyzed using the CR3000. However, this remains a future objective of our research group.

Reviewer #2:

The author's purpose of the investigation stress, obesity and diabetes is very interesting, also for medical and/or scientists from related research fields. I would recommend the suggestions described below:

Thank you for the suggestions!

1) The title should be short and concise. According to recent studies that would favor future citations to the paper. What is really new in the paper? The stress and obesity? The FORD and/or FORT analysis? Its correlation?

Thank you for this suggestion. As suggested, the title has been rephrased to "Evaluation of oxidative stress levels in obesity and diabetes by the FORT and FORD assays and correlations with anthropometric and laboratory parameters". The novelty of the paper is represented by the evaluation of oxidative stress levels in obesity and (or) diabetes by the

FORD and FORT assays, as well as the correlations between FORT and FORD with several anthropometric and biochemical parameters. Also, to our knowledge, this is the first report to evaluate oxidative stress levels by these methods in our country (Romania).

2) Abstract should be as quantitative as possible for rapid comparison with similar studies. Avoid imprecise terms such as significantly. On the other hand, if the effect is not statistically significant no need to mention it because it could be only a tendency not a fact.

Thank you for this suggestion. The abstract was revised, shortened and made as quantitative as possible for rapid comparison with other studies. Imprecise terms such as “significantly” have been deleted. If the effect was not statistically significant, it was no longer mentioned in the abstract.

3) Globally, the results are not properly described. The authors should first describe in a quantitative manner the data before jump to conclusions. Avoid imprecise and/or qualitative terms such as for example significantly lower or higher...but how much?

Thank you for this suggestion. We have revised the Results section and we have worked on a more appropriate quantitative description of the data. Imprecise and (or) qualitative terms, as suggested, have been deleted. Data with no statistical significance was no longer presented in the text and only displayed in the tables.

4) A figure for the correlations for FORD and/or FORT should be inserted. I think that what is new are these correlations and it is not enough analysis just by the Table. A better understanding of these data is obtained by the inclusion with these graphics.

Thank you for this suggestion. As suggested, we have inserted two new figures, one depicting the correlations between FORT and BMI in obese diabetic patients, and one depicting the correlation between FORD and BMI in obese patients.

5) Discussion should be more assertive and concise and eventually be divided in sections with titles highlighting the major results. Can the data obtained in the present study be compare with similar studies performed in other countries? Comparison is a step forward and should be inserted

Thank you for this suggestion. As suggested, we have divided the Discussion section in sections with titles highlighting the major results of our study. Also, our data was compared with similar studies coming from other countries.

6) In conclusion section, partial conclusions first and then global conclusions would also favor the take home message of the paper. Still, in this section it not clear what is new in the paper? Once again, imprecise terms such as significantly elevated (but how much?), should be avoided. Moreover, a take home message could eventually be inserted in the end of the conclusions.

Thank you for this suggestion. We added partial conclusions firstly, followed by global conclusions. Also, the novelty of the paper was stressed out in this section. A take home message was inserted.