
Dear editor,

Thank you very much for your letter and advice. We have revised the manuscript and would like to re-submit it for your consideration. We have addressed the comments raised by the reviewers, and the amendments are highlighted in red in the revised manuscript.

We hope that the revised version of the manuscript is now acceptable for publication in your journal.

Point by point responses to the reviewers are:

1- In the section of Introduction, "...all of which reflect blood glucose at the time of blood collection but are greatly affected by many physiological and pathological conditions." What physiological factors and pathological conditions were affected by the OGTT experiment? Please list them in detail.

Reply : Thank you much for the constructive comments. We highly appreciate your time in reviewing our paper and offering suggestions for improvement. The number of physiological and pathological conditions can affect blood glucose at the time of blood collection and, therefore, the results of the OGTT test. These physiological and pathological factors include diet, physical activity, mental state, illness, and medications, which have been listed in the manuscript. Further detail of each factor is provided as follows:

Diet - Excessive carbohydrate restriction before the trial (OGTT) may lead to the reduction of insulin secretion and false positive OGTT results.

Physical activity - Bed-ridden patients may exhibit impaired glucose tolerance, thus vigorous activity before the test may accelerate glucose utilization and significantly increase blood glucose levels.

Spiritual - Emotional agitation increases blood glucose levels.

Diseases - Liver, kidney, pancreatic, and endocrine diseases (e.g. Cushing's disease, Addison's disease, PA, hyperthyroidism, and pheochromocytoma) also affect glucose metabolism.

Drugs - Diuretics, glucocorticoids, and indomethacin also influence glucose levels in the body.

2.- In the section of search strategy, why did you search databases for 2 times in Nov. 2019 and Nov. 2020, could you explain about the reason?

Reply: We appreciate your comment. Our first search was conducted in Nov. 2019, in which we finished the extraction and initial analysis of data. However, subsequent data processing was interrupted by the COVID-19 epidemic. Before we were able to process the data again, we searched the mentioned databases

and websites a second time in Nov. 2020 to ensure that all the latest relevant literature was included.

3.- In the section of search strategy, there is no mesh word in the search query you have listed. Did you search for Mesh vocabulary, or not find any mesh words about your topic?

Reply: Prior to performing the systematic search, we identified the Mesh and Emtree terms, and their thesauruses in the Pubmed and Embase databases. These terms "GA," "DM," and "diagnosis or screening," listed in the search strategy section of the paper, refers to the search scope. However, since these terms may be confusing, it was corrected to the corresponding Mesh or Emtree term in the manuscript. The search strategies in each database and clinical trial website were performed repeatedly to compile the final list of studies, which can be seen in the attachment "64799-Supplementary Material.doc."

4. This manuscript has been re-edited and proofread by Medjaden Bioscience Limited. A language certificate is provided in the attachment "64799-Non-Native-Speakers-of-English-Editing-Certificate.pptx"