Response to reviewers:

Reviewer: 1

In this manuscript, the authors investigated the effect of hybrid closed-loop (HCL) delivery system on glycemic control and quality of life in patients with T1D. This study is important because there is limited information on the impact of HCL on patientreported outcomes (PROs). Nevertheless, there are some issues that needed to be written. Major issues 1) Details of insulin therapy at baseline were not provided. Given the 30-year history of diabetes in this study, it is assumed that patients on insulin pump therapy or pen insulin therapy with isCGM or RT-CGM were included. The description of insulin therapy prior to the introduction of HCL is essential to analyze the effect of HCL. 2) In the results section, the authors stated that %TiAM was not associated with AIC, %TIR or PROs, but was it associated with baseline AIC, %TIR or PROs?, or was it not associated with 12-month AIC, %TIR or PROs?, or was it not associated with the change of AIC, %TIR or PROs during 12 months? The data should be presented in figure or table. 3) The statements in the conclusion are different from the statements in the result section. The authors should present the study's results in the conclusion without exaggeration. For example, the association between improvement in glycemic control and reduction in fear of hypoglycemic episodes has not been analyzed, nor has the association with increase in awareness of hypoglycemic episodes. 4) A correlation analysis should be added for the improvement in glycemic control with HCL and the changes of PROs. Minor isuue 1) In the Results section, the significance test for HFS is p<0.000 and that for DDS is p=0.001, while in Table 2 they are p<0.001 and p<0.001, respectively. Which is correct? 2) In table 2, hbA1c is probably a typo for HbA1c.

<u>Response</u>: We thank the reviewer for their comments. We addressed the reviewers concerns in the new version. We made sure to clearly highlight the change in the manuscript of the newest submission. Please see our point-by-point response below:

1) Details of insulin therapy at baseline were not provided. Given the 30-year history of diabetes in this study, it is assumed that patients on insulin pump therapy or pen

insulin therapy with isCGM or RT-CGM were included. The description of insulin therapy prior to the introduction of HCL is essential to analyze the effect of HCL.

We agree with the reviewer that the type of insulin therapy prior to the study may have an effect on the outcomes of the study. Since the information is not available to us at this point, we mentioned this as a limitation to the study.

2) In the results section, the authors stated that %TiAM was not associated with AIC, %TIR or PROs, but was it associated with baseline AIC, %TIR or PROs?, or was it not associated with 12-month AIC, %TIR or PROs?, or was it not associated with the change of AIC, %TIR or PROs during 12 months? The data should be presented in figure or table.

We apologize that is sentence was not clear. We rephrased it in the manuscript to highlight that there was no significant association at baseline and at 12 months. Since none of these findings is statistically significant, we did not present them in a table.

3) The statements in the conclusion are different from the statements in the result section. The authors should present the study's results in the conclusion without exaggeration. For example, the association between improvement in glycemic control and reduction in fear of hypoglycemic episodes has not been analyzed, nor has the association with increase in awareness of hypoglycemic episodes.

We agree with the review's comment and we have revised the language in the conclusion section.

4) A correlation analysis should be added for the improvement in glycemic control with HCL and the changes of PROs.

We agree with the reviewer that having such information would be beneficial. However, we do not have the necessary data to report these findings.

Minor isuue 1) In the Results section, the significance test for HFS is p<0.000 and that for DDS is p=0.001, while in Table 2 they are p<0.001 and p<0.001, respectively. Which is correct? 2) In table 2, hbA1c is probably a typo for HbA1c.

All minor issues have been addressed.

Reviewer #2:

In this manuscript titled "Evaluation of Hybrid Closed-loop Insulin Delivery System in People with Type 1 Diabetes in Real-World Clinical Practice: A One-Year Observational Study", the authors evaluated the glycemic control and quality of life measures in patients with type 1 diabetes in a real-world clinical practice who used hybrid closed loop systems over a period of 12 months. As it evaluated significant number of qualityof-life parameters, this may be important to analyze the actual using effect of the corresponding hybrid closed-loop insulin delivery system. Therefore, as an interesting and well-designed small study, it can be published in this journal. Ps: Please pay attention to the use of abbreviations. The first time it appears, please provide the full spelling and abbreviation, but when it appears again, please write the abbreviation directly.

Response: We thank the reviewer for their comment. We addressed their notes in the new submission.