



**Baishideng  
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## PEER-REVIEW REPORT

**Name of journal:** World Journal of Diabetes

**Manuscript NO:** 51217

**Title:** Epicardial adipose tissue deposition in patients with diabetes and renal impairment:  
systematic review

**Reviewer's code:** 00506397

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Professor

**Reviewer's country:** United States

**Author's country:** Cyprus

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-10-14 14:13

**Reviewer performed review:** 2019-10-14 15:14

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Kleinaki et al. have outlined a carefully researched account of published medical literature aimed at revealing a putative relationship between epicardial adipose tissue and renal impairment in diabetic patients. Although their search culminated with ONLY SEVEN USABLE studies that form the basis of their Review, the manuscript describing “Epicardial adipose tissue deposition in patients with diabetes and renal impairment: systematic review” should be of interest to the wider readership of World Journal of Diabetes. However, the authors have done themselves a great disservice by not following the accepted norms and standards of writing a “Review”. This manuscript is formatted as a REGULAR RESEARCH ARTICLE, with Introduction, Materials and Methods, followed by Discussion etc. Therefore, in the current format, this manuscript is woefully inadequate to be considered AS A REVIEW ARTICLE for publication in the WJD. The authors would be well advised to consult a RECENT REVIEW ARTICLE published in WJD (“Diabetic cardiomyopathy: Pathophysiology, theories and evidence to date” by L Athithan et al., World J Diabetes 2019 October 15; 10(10): 490-510.), as an excellent example of how a Review article manuscript should be ORGANIZED and presented to the Reader.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication



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☐ Plagiarism

☐ No

Response:

Thank you for your thorough review and useful comments. Although our manuscript was initially formatted as a “Systematic Review”, aiming to gather all available evidence on this topic using strict inclusion and exclusion criteria, we acknowledge the significant impediment owed to the low number of included studies. Therefore, we have complied with your suggestion to alter the structure of our manuscript. Following the recommendation of the Editor-in-Chief, the revised manuscript is submitted as an Editorial.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Diabetes

**Manuscript NO:** 51217

**Title:** Epicardial adipose tissue deposition in patients with diabetes and renal impairment:  
systematic review

**Reviewer's code:** 02726701

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's country:** Chile

**Author's country:** Cyprus

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-11-01 19:12

**Reviewer performed review:** 2019-11-01 20:37

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

Comments on Epicardial adipose tissue deposition in patients with diabetes and renal impairment: systematic review Very nice manuscript. It is well planned, methods are correct and appropriate, data extraction is clear, results section is easy to read and the discussion is also well written. Authors recognize that source data have poor quality and do not allow to extract solid conclusions about the potential effect of epicardial adipose tissue on severity or prognosis of the kidney disease associated to diabetes. For example, adipose tissue appears to correlate to other clinically used markers, such albuminuria, HbA1c that have been demonstrated to predict adverse clinical outcomes. In this regard, it is advisable that authors add a comment about the utility to intend to quantify epicardial adipose tissue volume on top of habitual well validated, and surely cheaper, clinical variables for example: body mass index, total adipose mass, waist to hip ratio, anthropometrics and serum or urinary markers. Tables, references and abstract are all OK. In summary, nice paper that requires minor points to correct to be suitable to be published.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No



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Response:

Thank you for your positive comments and encouraging feedback. In view of your comments, we now emphasize on the superiority of Epicardial Adipose Tissue assessment when compared to conventional cardiovascular risk factors including BMI and waist circumference. For your convenience, the exact sections are the following:

Abstract: Lines 36-38

Core Tip: Lines 54-55

Future Directions: Lines 245-247

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Diabetes

**Manuscript NO:** 51217

**Title:** Epicardial adipose tissue deposition in patients with diabetes and renal impairment:  
systematic review

**Reviewer's code:** 03764245

**Position:** Editorial Board

**Academic degree:** MD

**Professional title:** Associate Professor

**Reviewer's country:** India

**Author's country:** Cyprus

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-11-05 06:15

**Reviewer performed review:** 2019-11-05 06:33

**Review time:** 1 Hour

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS



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Study evaluates Epicardial Adipose Tissue (EAT) and its association with raised cardiovascular risk markers. EAT assessment could serve as a biomarker to identify high-risk patients for cardiovascular adverse events.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### **Response:**

Thank you for your positive comments and approval of our manuscript.



## PEER-REVIEW REPORT

**Name of journal:** World Journal of Diabetes

**Manuscript NO:** 51217

**Title:** Epicardial adipose tissue deposition in patients with diabetes and renal impairment:  
systematic review

**Reviewer's code:** 03909861

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Assistant Professor

**Reviewer's country:** United States

**Author's country:** Cyprus

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-10-30 18:31

**Reviewer performed review:** 2019-11-05 23:19

**Review time:** 6 Days and 4 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input checked="" type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

This manuscript attempts to conduct a systematic review of the characteristics of epicardial adipose tissue (EAT) deposition in patients with diabetes and renal impairments. However, it only found 7 eligible studies and many of them did not report important outcome measurements. Consequently, the authors did not conduct quantitative analysis. Due to these reasons, it is better to call this article a review article instead of a systematic review. Similarly, due to the small sample size of included studies and participants, it is hard to make any firm conclusions based on the data of the included studies. I am not quite sure how the authors made the conclusions such as “patients with DM and nephropathy have increased EAT measurements”. What’s the comparison population here? Likewise, I don’t think the data in this study can convincingly lead to the conclusion that “EAT assessment could serve as a biomarker to identify high-risk patients for cardiovascular adverse events”. The results of this study can only support much more conservative conclusions.

## **INITIAL REVIEW OF THE MANUSCRIPT**

### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No



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Response:

Thank you for your thorough review and comments. Although the article was initially submitted as a "Systematic Review", we recognize the drawback of only few studies available to include, thus limiting the ability for quantitative analysis and firm conclusions. We have proceeded with your suggestion to alter the structure of our manuscript and following the recommendation of the Editor-in-Chief, the revised manuscript submitted is an Editorial. Taking into consideration the current absence of randomized control trials studying Epicardial Adipose Tissue assessment, quantitative analysis is still pending. A qualitative analysis of all eight studies included (we have refined our search and included one more study), shows that epicardial adipose tissue measurements are increased in that particular high-risk population. Additionally, our conclusions are supported by comparisons of the reported EAT measurements to healthy controls.

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Diabetes

**Manuscript NO:** 51217

**Title:** Epicardial adipose tissue deposition in patients with diabetes and renal impairment:  
systematic review

**Reviewer's code:** 02885976

**Position:** Editorial Board

**Academic degree:** MD, MSc, PhD

**Professional title:** Doctor, Medical Assistant, Professor, Research Scientist, Teacher

**Reviewer's country:** Argentina

**Author's country:** Cyprus

**Reviewer chosen by:** Jia-Ping Yan

**Reviewer accepted review:** 2019-10-30 01:16

**Reviewer performed review:** 2019-11-15 18:28

**Review time:** 16 Days and 17 Hours

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input checked="" type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The present systematic review is presented as the first descriptive study that assesses the role and significance of EAT by imaging techniques in patients with DM and renal impairment. The data obtained is limited given the low number of studies that meet the inclusion criteria of the review. However, it represents a first approach that needs to be confirmed with more evidence. I only have two observations for the authors: 1) It would be nice if the authors include a comment about false positive and true negative cases of EAT in DM and renal impairment patients. 2) Abstract: Results section: "...with a mean urinary excretion rate approximately...." The authors forgot to mention the protein excreted.

#### **INITIAL REVIEW OF THE MANUSCRIPT**

##### ***Google Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### ***BPG Search:***

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
- ☐ No

##### **Response:**

Thank you for your thorough review and positive comments. In response to your points:

- (1) The literature has not analyzed false positivity and the heterogeneity of included studies does not allow for such analysis. However, our findings show that EAT

measurements are increased in the population under study, compared to healthy controls, which we now note in our revised manuscript. In the same scope, we emphasized on the Future Directions the need for standardized cut-off points.

(2) Since the manuscript was revised according to Editor's recommendation for resubmission as an "Editorial", the abstract was also edited. As correctly indicated, albumin excretion was estimated at approximately 308 mg/g.