

February 07, 2015

Dear Editor,



Please find enclosed the edited manuscript in Word format (file name: 13666-review.docx).

Title: Gestational Diabetes – A Clinical Update

Authors: Ulla Kampmann, Lene Ring Madsen, Gitte Oeskov Skajaa, Ditte Smed Iversen, Niels Moeller,

Per Ovesen

Name of Journal: *World Journal of Diabetes*

ESPS Manuscript NO: 13666

The manuscript has been improved according to the suggestions of the reviewers (Please see below).

Again, thank you very much for your attention to this manuscript.

Comments from reviewer 00060192:

Pregestational and gestational diabetes mellitus (DM) may be associated with a variety of fetal effects including increased rate of spontaneous abortions, intrauterine fetal death, congenital anomalies, neurodevelopmental problems and increased risk of perinatal complications. Additional problems of concern are fetal growth disturbances causing increased or decreased birth weight. Although there are different causes for fetal growth restriction or for fetal excessive growth (macrosomias), paradoxically both are associated with the "metabolic syndrome" and its long term consequences. Although the authors have described in detail the association between gestational DM and macrosomia, they have not mentioned the association between DM and intrauterine growth restriction. Ornoy A. Prenatal origin of obesity and their complications: Gestational diabetes, maternal overweight and the paradoxical effects of fetal growth restriction and macrosomia. *Reprod Toxicol.* 2011

Answers to reviewer 00060192:

The passage "*Also worth noticing, is the finding that the relation between birth weight and risk of type 2 diabetes is U-shaped and therefore both infants with decreased and those with increased birth weight are at increased risk of developing type 2 diabetes as compared to persons being born with a normal birth weight*" has been added to the "LONG TERM EFFECTS IN OFFSPRING OF WOMEN WITH GDM" section and the reference by Ornoy has been added. (The reference by Ornoy replaces the reference by Dabelea D. The predisposition to obesity and diabetes in offspring of diabetic mothers. *Diabetes Care* 2007; 30 Suppl 2:S169-74).

Comments from reviewer 02459030:

Dear doc. Kampmann, Thank you for your contribution. The manuscript offers a systematic review of gestational diabetes, based on a large amount of references. Here, I have some personally advise:

It is noted that the manuscript needs carefully checking to avoid spelling mistakes or inaccurate details, such as "IAPPSG" (page5, line11), "2014.06.008" (page24, line15) and "1999 fasting plasma glucose ≥ 7.8 mmol/l" (page6, line1) and to unify the full text words, such as "T2D" (page16, line5).

Although mentioned several times that GDM is associated with obesity throughout the text, it lacked of specific data.

Furthermore, it's insufficient to understand why the obese women are susceptible to GDM in the paragraph about the pathophysiology of GDM in obese or lean women. (page6, line18-22)

Additional problems of concern are incomprehensive interpretation of the new guidelines (2013 WHO and 2014 ADA), especially the modification of screening and diagnostic testing. And the pros and cons of more strict diagnostic criteria could be further explored.

In addition, a review is generally not be referred to another review, such as the 2nd, 17th and 48th.

The list of references does not completely adhere to our style. I think that the improvement of the paper along these directions is necessary. I would be glad to re-review the paper in greater depth.

Answers to reviewer 02459030:

The inaccurate details have been corrected.

There are several references throughout the manuscript that confirms the association between GDM and obesity (Ref. 11, 17, 18, 19, 20, 21, 22 and 39)

A sentence has been rephrased to explain the pathophysiology (p. 7).

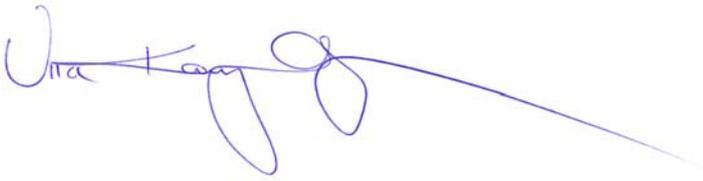
We agree with the reviewer that the section may be a bit incomprehensive and the section has therefore been rephrased.

We generally agree with the reviewer but we find the reviews of great importance.

The list of references has been revised to adhere with the style of the journal.

We sincerely hope that you will find the review suitable for publication.

Sincerely yours,

A handwritten signature in blue ink, appearing to read 'Ulla Kampmann', with a long horizontal flourish extending to the right.

Ulla Kampmann, MD, PhD

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