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Baseline differences may impact on the relationship between dietary tryptophan and the risk of obesity and type 2 diabetes

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Abstract

One study showed that dietary tryptophan and the risk of obesity and type 2 diabetes(T2D). However, baseline characteristic differed between tertiles of cumulative dietary tryptophan intake may impact on the relationship between dietary tryptophan and the risk of obesity and type 2 diabetes.

Key Words: Diabetes; Obesity; Dietary; tryptophan

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Core Tip: One study showed that dietary tryptophan and the risk of obesity and type 2 diabetes(T2D). However, baseline characteristic differed between tertiles of cumulative dietary tryptophan intake may impact on the relationship between dietary tryptophan and the risk of obesity and type 2 diabetes.

TO THE EDITOR

In recent years, American Diabetes Association started to strongly advocate the Mediterranean diet (MD) over other diets in patients with diabetes mellitus (DM) because of its ³beneficial effects on glycemic control and cardiovascular (CV) risk factors^[1]. We are pleased to read the article from Wang W,et al.^[2]. The results of their study showed that dietary tryptophan and the risk of obesity and type 2 diabetes(T2D). These findings may provide valuable information to public health authorities for making novel dietary suggestions and preventing obesity and T2D more effectively. However, there are still issues worth discussing with the authors in this article.

The mainly problem of the study is that baseline characteristic differed between tertiles of cumulative dietary tryptophan intake. According to the baseline characteristics of the participants stratified by tertiles of cumulative dietary tryptophan intake (Table 1), ²body mass index (BMI), waist-hip ratio (WHR), systolic blood pressure, diastolic blood pressure, and energy intake, high school education, prevalent overweight, prevalent hypertension differed across the ertiles of cumulative dietary tryptophan intake. ¹At baseline, people with obesity, overweight (BMI ≥ 24), and hypertension were more likely in the first tertile. Obesity is a well-known risk factor for the type 2 diabetes^[3, 4]. In this study, negative correlation trend was found between BMI and tertiles of cumulative dietary tryptophan intake. Is increased diabetes risk a cause of obesity or insufficient tryptophan intake?

Overall, baseline characteristic differed between tertiles of cumulative dietary tryptophan intake may impact on the relationship between dietary tryptophan and the risk of obesity and type 2 diabetes.

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PRIMARY SOURCES

1	Wei qi Wang, Lin Liu, Zhen Tian, Tianshu Han, Changhao Sun, Ying Li. "Dietary Tryptophan and the Risk of Metabolic Syndrome: Total Effect and Mediation Effect of Sleep Duration", Nature and Science of Sleep, 2021 <small>Crossref</small>	15 words — 3%
2	www.researchjournal.co.in <small>Internet</small>	15 words — 3%
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