



BAISHIDENG PUBLISHING GROUP INC

8226 Regency Drive, Pleasanton, CA 94588, USA

Telephone: +1-925-223-8242

Fax: +1-925-223-8243

E-mail: editorialoffice@wjgnet.com

http://www.wjgnet.com

ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 10330

Title: Subclinical cardiovascular disease in type 2 diabetes mellitus: to screen or not to screen

Reviewer code: 02714709

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-01 09:11

Date reviewed: 2014-04-01 13:16

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> Minor revision
		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

Strengths: - A comprehensive review that presents and summarizes a large body of published data regarding the issue. Weaknesses: - No suggestion on the recommended way of screening (if any) was made. The readers are left in doubt whether they should make efforts or not to screen their patients. - A scheme of the routine screening efforts recommended by the authors would be welcome as it would orient the readers. - Some cost-benefit analysis would also improve the overall quality of the MS.



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ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 10330

Title: Subclinical cardiovascular disease in type 2 diabetes mellitus: to screen or not to screen

Reviewer code: 02797788

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-01 09:11

Date reviewed: 2014-04-03 21:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

In table 1, the age should be specified to make it clear; furthermore, the traditional and novel risk factors are suggested to be further indicated.



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ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 10330

Title: Subclinical cardiovascular disease in type 2 diabetes mellitus: to screen or not to screen

Reviewer code: 00506252

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-01 09:11

Date reviewed: 2014-04-06 07:14

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input checked="" type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

General Comments This is a review how to investigate cardiovascular disease in type 2 diabetes mellitus and written well briefly. We know the management for the patients with both diabetes and cardiovascular disease, but there are no established guidelines or no agreement for the patients with type 2 diabetes without cardiovascular disease. Diabetes mellitus is the most considerable risk factor to predict future cardiovascular disease, but only management for diabetes and blood glucose does not result in decreasing cardiovascular disease enough as the authors described. **Specific Comments** P 3, 19-19, "intensive or conventional multifactorial intervention" should be explained more in detail including medication not to misunderstand. Recently, MD-CT becomes a popular tool to detect coronary stenosis. The present status of MD-CT should be mentioned for a screening test for type 2 diabetes mellitus at high cardiovascular risk even without symptom.



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ESPS Peer-review Report

Name of Journal: World Journal of Clinical Cases

ESPS Manuscript NO: 10330

Title: Subclinical cardiovascular disease in type 2 diabetes mellitus: to screen or not to screen

Reviewer code: 02637495

Science editor: Ling-Ling Wen

Date sent for review: 2014-04-01 09:11

Date reviewed: 2014-04-10 17:41

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
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<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

the issue is very interesting and it has been written quite well estructured: Just some minor points:

1. About the autonomic neuropathy: perhaps it would be necessary to explain briefly how to evaluate it.
2. When you talk about the echocardiogram, there are not many works that demonstrate it usefulness related with T2DM. They must be reflected in your work.
3. At the CAC section,at the firt sentence; "coronary artery calcium (CAC)[...]"
4. English and grammar need to be polish slightly