



PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

Manuscript NO: 58060

Title: Is there a role for glucagon-like peptide-1 receptor agonists in the management of diabetic nephropathy?

Reviewer's code: 02446612

Position: Peer Reviewer

Academic degree: BCPS, PharmD

Professional title: Associate Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Greece

Manuscript submission date: 2020-07-05

Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-07-06 12:48

Reviewer performed review: 2020-07-06 15:56

Review time: 3 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Overall a timely and brief editorial on possible DKD benefit with the use of GLP1 agonists. Working through the checklist provided to me by the editor, I believe the manuscript is well written and meets the appropriate criteria (many don't apply as an editorial) Specific comments for the authors to consider 1) In both the last sentence of the abstract and main text, would recommend what patient population this should be evaluated in (ie those with established DKD) as the CVOTs are in a very different population and less likely to see a robust renal benefit 2) Perhaps stating if there are any on-going trials with this class of agents specifically in DKD should be stated(I don't believe there are after doing a 'clinicaltrials.gov' search earlier this year) 3) In first paragraph of the main text, the author lists risk factors for DKD progression, one of these is a 'positive family history', you may want to state a history of what specifically 4) In the second paragraph of the main text, is liraglutide really a 'long-acting' agent given it is dosed once daily compared to the other agents listed which are once-weekly? 5)In the paragraph describing the renal outcomes from the CVOTs, I suggest also adding the composite renal outcome with semaglutide was primarily due to change in albuminuria, you do this for the other two studies described, good to be consistent, this to me is why I don't recommend them for DKD (as opposed to SGLT2 inhibitors that had more robust renal outcomes in their CVOTs) 6) A brief statement that the CVOTs were not designed to assess renal outcomes (nor powered to) may add to the manuscript 7) Abstract has a typo in second to last sentence: 'Indeed, given than macro...' shouldn't it be 'given that...'?