

## PEER-REVIEW REPORT

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

**Manuscript NO:** 62671

**Title:** Diabetic gastroenteropathy: an underdiagnosed complication

**Reviewer's code:** 04094127

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Chief Physician, Full Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** Peru

**Manuscript submission date:** 2021-01-14

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-01-17 02:16

**Reviewer performed review:** 2021-01-17 07:41

**Review time:** 5 Hours

<b>Scientific quality</b>	<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 Grade E: Do not publish
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<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
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	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**

Diabetic enteropathy can affect any portion of the gastrointestinal tract. Zavaleta et al summarized that the pathophysiology, symptoms, diagnosis, and treatment of diabetic gastroenteropathy. In section of gastric disorders, authors cited a study of 7107 patients with type 1 diabetes showed that women were more likely to have gastroparesis than men, but less address potential points on sex differentiation.

## PEER-REVIEW REPORT

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

**Manuscript NO:** 62671

**Title:** Diabetic gastroenteropathy: an underdiagnosed complication

**Reviewer's code:** 00227633

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Portugal

**Author's Country/Territory:** Peru

**Manuscript submission date:** 2021-01-14

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-01-15 10:25

**Reviewer performed review:** 2021-01-19 15:06

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

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Re-review</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## **SPECIFIC COMMENTS TO AUTHORS**

The author's purpose of the review is very interesting and timely, also for scientists from related research fields. Suggestions are described below: 1) Abstract should be quantitative as possible for rapid comparison with others studies. The abs should be a mirror of the review and not only a kind of intro, aims or approaches. Incidences and percentages of gastro diabetes should be mention in the abs and also in the intro. 2) The paper includes an excellent % of references from the last 3 years. However fundamental studies about insulin, diabetes and gastroenteropathy. Furthermore, at the end introduction, it is also not clear what is the main message and relevant points of the review that should be emphasize at this stage. 3) I would like to make the following suggestion: At the introduction a figure or scheme with the chronology or a timeline about about insulin, diabetes and gastroenteropathy. This year 2021, will be an especially important milestone in Diabetes treatment and research since it will be 100 years since insulin was discovered by Banting, Best and McLeod at the University of Toronto in 1921. Thus, this timeline will also reflect the understanding of the authors about these events and the association with diabetic gastro. This personal view timeline will be interesting and also pedagogical for the others researchers and professors in the field as well as also for others scientists. 4) Another suggestion is a inclusion of a new figure or a scheme with the structures of all the drugs most used to treat diabetic gastro that were referred within the review. 5) The figures are good. Some could be globally improved as possible, for instance using letters and sizes not so difficult to see and read, once WJD deserves high quality figures and with rigor would avoid lacking of interest for the figures. 6) Globally the conclusion section could follow the discussion, also with perspectives for future research. Eventually, it could be divided in sections with titles highlighting the major observations and take home message within the review. 7) Please check the year of some references and/or others issues that are absent.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

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

**Manuscript NO:** 62671

**Title:** Diabetic gastroenteropathy: an underdiagnosed complication

**Reviewer's code:** 00227633

**Position:** Editorial Board

**Academic degree:** PhD

**Professional title:** Associate Professor

**Reviewer's Country/Territory:** Portugal

**Author's Country/Territory:** Peru

**Manuscript submission date:** 2021-01-14

**Reviewer chosen by:** Le Zhang

**Reviewer accepted review:** 2021-03-01 10:02

**Reviewer performed review:** 2021-03-01 15:40

**Review time:** 5 Hours

<b>Scientific quality</b>	<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
<b>Language quality</b>	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
<b>Conclusion</b>	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

## SPECIFIC COMMENTS TO AUTHORS

The authors were globally positive regarding the reviewer's comments. The paper was

globally improved upon changes introduced by the authors. I would like to make the following last minute suggestions for the paper: Figure 1: timeline. Nothing is referred between 1980 and 2000? Perhaps it could be added any traditional specific drug use in gastro enteropathy and/or diabetes introduced for the first time in practice in that period? perhaps in the XXI century it also could be inserted recent drugs in diabetes such as metformin (2012?)? and/or Glucosidases inhibitors? Globally, figures 4 and 5 could be improved.