

PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

Manuscript NO: 78886

Title: Comparative analysis of linagliptin vs gliclazide on incidence of hypoglycemia

and 3-point MACE in T2DM: Systematic literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02459759 Position: Associate Editor Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-07-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-21 07:51

Reviewer performed review: 2022-08-02 06:48

Review time: 11 Days and 22 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [] Grade D: Fair [Y] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [Y] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[]Yes [Y]No



Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This article is the usual, nothing new



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02602042 Position: Editorial Board Academic degree: MD, PhD

Professional title: Associate Professor, Dean, Deputy Director, Research Scientist

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-07-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-08-03 23:12

Reviewer performed review: 2022-08-06 04:09

Review time: 2 Days and 4 Hours

Scientific quality	[] Grade A: Excellent [Y] Grade B: Very good [] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This article has an interesting topic. Authors compared the CV safety of linagliptin and gliclazide in patients with T2DM. Although authors could not find any comparative study for the risk of hypoglycemia between Gliclazide and Linagliptin, the analysis showed gliclazide had shown similar glycemic efficacy and 50% lesser risk of hypoglycemic compared to Glimepiride, and gliclazide can be considered as glucose lowering drugs that can be given safely in T2DM patients with CVD or at high risk of CVD. The topic has delivered promising clinical message and should be of great interest to the readers. It can cause us to concern the effects of SUs on the treatment of diabetes with CV. The submission is worthy of publication.



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Peer-review model: Single blind

Reviewer's code: 05445949 Position: Editorial Board Academic degree: MD, PhD

Professional title: Assistant Professor, Chief Physician, Research Associate

Reviewer's Country/Territory: Serbia

Author's Country/Territory: India

Manuscript submission date: 2022-07-20

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-08-16 06:26

Reviewer performed review: 2022-08-16 06:36

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y] Yes [] No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors narratively reviewed glicla vs lina regarding beneficial cardiovascular effects. The study is of importance in clinical practice. But, the study benefit is questionable as dSU are significantly less used in CV patients.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05463920 Position: Editorial Board Academic degree: MD

Professional title: Professor, Reader (Associate Professor)

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-07-20

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-08-16 02:14

Reviewer performed review: 2022-08-24 08:10

Review time: 8 Days and 5 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors systematically analyzed the incidence of hypoglycemia and 3-point mace in T2DM patients treated with linagliptin and gliclazide. This is a very interesting topic and the results also have good clinical application. If the authors can modify some improper expressions or use in the paper, I believe the quality of the manuscript will increase a lot. I suggest the following modifications: 1. Abbreviations should not be used in the title. What are MACE and 3P-MACE (in the text)? It should be explained clearly. 2. ADVANCE, CARMELINA and CAROLINA trial have the same application value. Therefore, the Abstract should be written in parallel, not only focusing on the CAROLINA trial, but also the other two. Moreover, it should not be mentioned completely in "Introduction" and should also be briefly described. Otherwise, overwrite the summary Abstract. 3. In the Abstract, it is stated that "A systematic review was conducted to identify all the clinical studies published from by 2008 which compared the two drugs in patients with T2DM" (Page2), while in "Study selection", it is stated that... Records published before 2008 were removed" (Page6). Please check clearly. 4. Although most readers understand some abbreviations, when they first appear in the text, they should be explained in full name, and the abbreviations of the same term in the same article should be consistent. Such as T2DM/T2D, HbA1c, DPP-4/DPP4, HR, 95%CI/95% CI, MACE/3P-MACE/3-P MACE, BG/SMBG, P=/ P =, GLD,..... Please check the whole manuscript to standardize these abbreviations. 5. What is the point of "Key Summary Points"? Need to be improved? Unclear. 6. In Page 2, "23 Hypoglycemia was a secondary endpoint of the ADVANCE trial", "23" in this sentence means? 7. Like CARMELINA (need further improvement), what is the abbreviation of ADVANCE and



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CAROLINA? It should be clarified according to the literature. 8. All abbreviations appearing in the manuscript should be listed in Abbreviations. 9. The stratification of articles is not clear enough. Is there a difference between "Introduction" and "Background"? "Study selection" and "narrative synthesis of data" are inappropriate as introductions. 10. It can't just be "synthesis" without "narration". For each section of the Result, use 1-2 sentences to clarify the purpose and the result. 11. Does "±"in "Gliclazide/linagliptin ± metformin (no comparator)" indicate whether or not to combine (the same question is asked in other places)? Please state clearly. 12. Don't just be loyal to the literature. The units of the same marker should be consistent. For example, BG has four units, namely mmol / liter, mg / deciliter, mg / dl and mmol / L. It should be unified in international units to facilitate readers to read by comparison. In addition, if both international units and customary units are given, then each blood sugar value should be the same, so that the whole manuscript can be unified. Check the whole manuscript and revise the inconsistent results. 13. In "(P < 0.0001 for treatment difference) [42]" (Page12), check the significant digits and spaces of this P value?



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Diabetes

Manuscript NO: 78886

Title: Comparative analysis of linagliptin vs gliclazide on incidence of hypoglycemia and major adverse cardiovascular events in type 2 diabetes: Systematic literature review

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05463920 Position: Editorial Board Academic degree: MD

Professional title: Professor, Reader (Associate Professor)

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2022-07-20

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2022-09-23 00:28

Reviewer performed review: 2022-09-25 07:38

Review time: 2 Days and 7 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [Y] Accept (General priority) [] Minor revision [] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

After the revision, the quality of the manuscript has been significantly improved, and there is still a suggestion for revision, which is worth considering. 1) It is not necessary to extract the statistical value when quoting others' results and/or conclusions as evidence. Moreover, most original articles have statistical differences set as "P<0.05 (very few are also set at P<0.01)". Therefore, as a review manuscript, it is best to delete the P value without uniform text. 2) Please note that in the manuscript I saw (78886_Auto_Edited), only 10 references were attached, while 60 references were cited.