

PEER-REVIEW REPORT

Name of journal: *World Journal of Diabetes*

Manuscript NO: 84158

Title: Dysglycemia and arrhythmias

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05189761

Position: Peer Reviewer

Academic degree: MBBS, MD

Professional title: Research Fellow, Staff Physician

Reviewer's Country/Territory: United States

Author's Country/Territory: China

Manuscript submission date: 2023-02-28

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-15 17:31

Reviewer performed review: 2023-04-15 18:09

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<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
Conclusion	<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
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

In this review authors discuss about the various implications of glycemic control with cardiac arrhythmia. This is an interesting work and I congratulate the authors for their effort. I have the following recommendations 1. In methodology mention manuscript of which languages were used? Which all articles were included metanalysis, RCT, cohort studies, cross sectional studies, retrospective, prospective studies, case reports? 2. Mention what was included and what was excluded. How many people screened the articles? please change the time line to the duration of the first article to the November 2022 3. Include a section on result and mention: How many articles were found, mention types of articles, how many included and how many excluded. Include the definitions of hyperglycemia, hypoglycemia and DM based on the blood sugar. Were they similar across all studies if not can mention in limitation 4. Was google scholar used? if not mention in limitation 5. Consider adding schematic images alike image one which is extremely good

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Manuscript NO: 84158

Title: Dysglycemia and arrhythmias

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05151713

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Professor

Reviewer's Country/Territory: Belgium

Author's Country/Territory: China

Manuscript submission date: 2023-02-28

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-04-20 22:45

Reviewer performed review: 2023-05-04 06:17

Review time: 13 Days and 7 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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Conclusion	<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
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

SPECIFIC COMMENTS TO AUTHORS

This is a comprehensive review of the literature regarding the cardiac effects of hyperglycemia, hypoglycemia, and glycemic variability. The text is clear. The author reports both the epidemiological findings and the underlying biochemical mechanisms. To be accepted with minor changes For the authors: The authors are to be congratulated for this review. We liked the fact that they detailed the biochemical mechanisms for understanding how changes in blood glucose levels can affect cardiac function. Page 5: High glycemic variability appears to exert more detrimental effects than persistent hyperglycemia on the pathogenesis of diabetic complications [7, 8], and also has been associated with an increased risk of cardiac arrhythmias than those with good glycemic control [9]. Better to say “and has also been associated with an increased risk of cardiac arrhythmias compared to those with good glycemic control.” Page 6: As for the overt DM, numerous studies have shown that diabetes is associated with an increased risk of AF and has been considered a risk factor for AF in healthy individuals and hospitalized patients[10, 15, 16] Further develop that to such an extent that diabetes is included in the CHADVASc, CHARGE AF, CHEST, and MR DASH



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scores that assess the chances of developing AF in future years.