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PEER-REVIEW REPORT

Name of journal: *World Journal of Diabetes*

Manuscript NO: 89337

Title: Comparative efficacy of sodium glucose cotransporter-2 inhibitors in the management of type 2 diabetes mellitus: A real-world experience

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 03912151
Position: Peer Reviewer
Academic degree: MD, PhD

Professional title: Doctor, Professor, Research Scientist, Teacher

Reviewer's Country/Territory: China

Author's Country/Territory: United Kingdom

Manuscript submission date: 2023-10-28

Reviewer chosen by: Yu-Lu Chen

Reviewer accepted review: 2023-12-18 13:29

Reviewer performed review: 2023-12-26 14:43

Review time: 8 Days and 1 Hour

Scientific quality	[Y] Grade A: Excellent [ ] Grade B: Very good [ ] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Novelty of this manuscript	[Y] Grade A: Excellent [ ] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No novelty
Creativity or innovation of this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No creativity or innovation

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Scientific significance of the conclusion in this manuscript	[ ] Grade A: Excellent [Y] Grade B: Good [ ] Grade C: Fair [ ] Grade D: No scientific significance
Language quality	[Y] Grade A: Priority publishing [ ] 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
Peer-reviewer statements	Peer-Review: [Y] Anonymous [ ] Onymous
	Conflicts-of-Interest: [ ] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

This study is a real-world study of SGLT-2 inhibitors that compared the clinical efficacy and safety of dapagliflozin, canagliflozin, and empagliflozin at a single clinical center. We see the benefits of SGLT-2i in lowering HbA1c, body weight, and blood pressure. At present, few studies have evaluated different SGLT-2i in clinical follow-up, and this study makes up for this deficiency. Secondly, the follow-up time is long enough and the data are more convincing, which can provide valuable reference information for clinicians. However, there are still some improvements needed in this study, and we hope to provide a reference for the authors: 1. In this study, other concomitant hypoglycemic drugs were recorded in the results. Although the real-world study was patient-centered, clinicians were also interested in the amount of use of these three SGLT-2i drugs, which we hope to be mentioned in the study; 2. For Cardiovascular outcomes, there need to be add lipid metabolism indicators and the occurrence of major adverse cardiovascular events. The author mentioned the cardiovascular benefits in the article but described them less. 3. In Subgroup analysis, the authors mention that "only those on canagliflozin showed a statistically significant reduction of albuminuria at the

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latest follow up." In the discussion part of canagliflozin, the authors considered a partial association with higher baseline ACR. In fact, whether this is also related to the action of canagliflozin with SGLT1.