

## PEER-REVIEW REPORT

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

**Manuscript NO:** 89226

**Title:** Chiglitazar and Thiazolidinedione in patients with type 2 diabetes: Which is better?

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 05278434

**Position:** Peer Reviewer

**Academic degree:** PhD

**Professional title:** Professor

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

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

**Manuscript submission date:** 2023-11-02

**Reviewer chosen by:** Yu-Lu Chen

**Reviewer accepted review:** 2023-12-06 14:17

**Reviewer performed review:** 2023-12-14 10:09

**Review time:** 7 Days and 19 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 Grade E: Do not publish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 checked="" 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 type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation

<b>Scientific significance of the conclusion in this manuscript</b>	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
<b>Language quality</b>	<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
<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

## SPECIFIC COMMENTS TO AUTHORS

The author presents a thorough and analytical evaluation of the article titled 'Indirect Comparison of Efficacy and Safety of Chiglitazar and Thiazolidinedione in Patients with Type 2 Diabetes: A Meta-Analysis.' The review identifies both strengths and weaknesses, providing valuable feedback on different aspects of the study. The author recognises the significance of the study in the context of the diabetes pandemic and emphasises the need for new treatments. They appreciate the authors' efforts in conducting a comparative meta-analysis, which enhances comprehension of oral hypoglycemic drugs. Additionally, the review provides a clear explanation of Chiglitazar's mechanism of action and critically evaluates the indirect comparison methodology, highlighting its limitations and reliance on a bridge comparator. The review criticises the study for not providing a clear description of its methodology. It highlights significant differences in the number and timing of studies between Chiglitazar and thiazolidinediones, which could potentially affect comparability. The author expresses concerns about the article's focus on the augmented dose of Chiglitazar and calls for a more comprehensive analysis of standard dose results, as well as justification for the chosen dosage. Furthermore, the



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review highlights statistical limitations, such as high heterogeneity and wide confidence intervals. Therefore, alternative methods, such as matched adjusted indirect comparison and individual patient data analysis, should be considered. The review acknowledges the authors' contribution but highlights the need for a more rigorous evaluation. It suggests that the current limitations require caution in drawing definitive conclusions about Chiglitazar's superiority over thiazolidinediones. Overall, the critique is thorough, well-structured, and provides valuable feedback to enhance the quality and reliability of the meta-analysis.