

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10775

**Title:** Type 2 diabetes is associated with worse functional outcome of ischemic stroke

**Reviewer code:** 00113121

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-04-19 17:13

**Date reviewed:** 2014-04-23 19:04

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

# COMMENTS TO AUTHORS

The authors present a systematic study with the aim to estimate the clinical profile and prognosis of stroke in patients with diabetes mellitus. Of the 482 acute ischemic stroke patients included in the analysis, 155 (32.2%) had diabetes mellitus, and diabetes mellitus was associated with worse functional outcome at discharge. The study is potentially interesting but can be improved if the following considerations are addressed: 1. It would be interesting to know the frequency of the different ischemic stroke subtypes (lacunar, atherothrombotic, cardioembolic, infarcts of unusual etiology and infarcts of unknown etiology) in the study sample 2. Lacunar infarcts are the ischemic stroke subtype with a better functional prognosis (Expert Rev Neurother 2014;14:261-76); In the discussion, it should be noted that, although diabetic patients with stroke have poorer short term functional prognosis, the subgroup of diabetic patients with lacunar infarction shows better functional prognosis (J Neurol. 2005 Feb;252(2):156-62). The inclusion and comment of these two references is recommended. 3. A recently published study on impact of female gender on prognosis in type 2 diabetic patients with ischemic stroke should be also commented in the Discussion (Eur Neurol 2006; 56; 6-12).

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10775

**Title:** Type 2 diabetes is associated with worse functional outcome of ischemic stroke

**Reviewer code:** 00504772

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-04-19 17:13

**Date reviewed:** 2014-04-29 07:01

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input checked="" type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input checked="" type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

# COMMENTS TO AUTHORS

In this manuscript, the authors tried to analyze the effects of T2DM on the severity of stroke and stroke outcomes. They concluded that T2DM does not affect stroke severity but is a independent factor associated with worse functional outcome at discharge. The research is highly clinical relevant. However I have following concerns. 1. Please describe the criteria that were used for patient enrollment. 2. The locations of the stroke were not indicated, which may influence the functional outcomes. The paper showed all patients underwent CT at admission, a second CT was performed if clinically indicated. CT scan alone may not be enough, because most of ischemic stroke do not show changes in CT at admission. 3. The authors did not mention what treatments were given to these patients. 4. The mRS score may not be a good method to evaluate outcomes of these patients, because stroke patients were discharged 7 days later. NIHSS may be a better way for the evaluation.

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10775

**Title:** Type 2 diabetes is associated with worse functional outcome of ischemic stroke

**Reviewer code:** 00506294

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-04-19 17:13

**Date reviewed:** 2014-06-05 18:40

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

# COMMENTS TO AUTHORS

The manuscript entitled: "Type 2 diabetes is associated with worse functional outcome of ischemic stroke" has been do to assess whether ischemic stroke severity and outcome is more adverse in patients with type 2 diabetes mellitus. The authors studied prospectively 482 patients 40.2% males, aged 78.8±6.7 years, 155 with type 2 diabetes and studied them with complete methodology. Stroke severity was evaluated with the National Institutes of Health Stroke Scale score at admission. The outcome was assessed with the Rankin scale score at discharge and with in-hospital mortality. They also studied adverse outcome and the length of hospitalization. The main findings of the study are that the severity of ischemic stroke does not appear to differ between patients with type 2 diabetes and those without type 2 diabetes, but type 2 diabetes independently portends more adverse functional outcome at discharge in this population. This is an important conclusion and accordingly, management of hyperglycemia might have beneficial effects in patients with acute ischemic stroke, but this is not yet completely established.

# ESPS Peer-review Report

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

**ESPS Manuscript NO:** 10775

**Title:** Type 2 diabetes is associated with worse functional outcome of ischemic stroke

**Reviewer code:** 00043561

**Science editor:** Fang-Fang Ji

**Date sent for review:** 2014-04-19 17:13

**Date reviewed:** 2014-06-08 18:53

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)		BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

# COMMENTS TO AUTHORS

I carefully read the manuscript by Tziomalos et al. They present valuable data regarding the outcome expectations for T2DM patients after having an ischemic stroke. Such studies are important especially when they come from different populations. However, subjects with diabetes have different risk profiles according to the duration as well as severity of the disease. Therefore, I need to point on some points that could be improved in the manuscript. 1. The article needs some classified evaluations regarding the severity of diabetes, based on HbA1c categories, presence of complications, and disease duration. As an example, I see there were no differences between the diabetics and non-diabetics regarding established CKD, but weren't there also no differences with respect to proteinuria? Do we know whether presence of proteinuria does not affect outcome? 2. This may also be true for the disease duration. The authors could easily examine whether disease duration of longer than 10 years could have a worse outcome or not. 3. HbA1c values above 9% versus below 9% would also worth evaluation regarding the study outcomes. 4. These analyses could be performed by binary logistics using multiple models. In such case, we could still discuss whether the study sample was sufficient or not but this would be only a limitation. In its present form, the study lacks some major answers for the readers of the journal.