

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

ESPS manuscript NO: 16288

Title: In treating diabetes, what is important? Glucose levels or outcome measures?

Reviewer's code: 00506294

Reviewer's country: Spain

Science editor: Yue-Li Tian

Date sent for review: 2015-01-10 14:09

Date reviewed: 2015-02-24 20:33

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input checked="" type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The editorial: "IN TREATING DIABETES What is Important Glucose Levels or Outcome Measures" has interest because analyze the important to order fasting and 2h postprandial blood glucose which will provide glucose and renal function tests. Some studies confirm that insulin therapy is conducive to protection against renal failure and dialysis. Equally important in to exclude use of renin angiotensin inhibitors drugs to treat diabetes as a complimentary measure of protection for renal failure. The author should to explain first time the meaning of glucose, delta (d) glucose (2hPPG-FBG)

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

ESPS manuscript NO: 16288

Title: In treating diabetes, what is important? Glucose levels or outcome measures?

Reviewer's code: 03117386

Reviewer's country: United States

Science editor: Yue-Li Tian

Date sent for review: 2015-01-10 14:09

Date reviewed: 2015-01-18 04:24

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	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"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input checked="" type="checkbox"/> Grade D: Fair	<input checked="" type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input checked="" type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Minor revision
		BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

The author presents an editorial viewpoint about the importance of post-prandial glucose testing in the management of diabetes. The author states that the ADVANCE trial did not "mention whether any renal function tests were considered in the assessment of nephropathy". However, this is not true. In the methods of the ADVANCE trial (NEJM. 2008;358:2562) the authors describe that nephropathy was defined as development of microalbuminuria using the urine albumin/creatinine ratio or doubling of serum creatinine). The author goes on to state that only the HbA1c was used to assess glycemic control in the ADVANCE trial and that 2hPPG was not one of the end-points assessed. However, the authors does not provide any information to suggest in what way 2hPPG would have been a superior end-point for the purposes of the trial. Prior work by Cavalot et al. (Diabetes Care 34:2237-2243, 2011) shows that 2hPPG did not predict cardiovascular outcomes any better than HbA1c. The author also mentions that the 2hPPG is the most sensitive test for diagnosis of DM, which is untrue. The most sensitive test is an oral glucose tolerance test. The argument based on a single case study that shows "improvement" in eGFR from 58 to 59 ml/min is extremely weak. I would be surprised if any clinician found this degree of change significant enough to influence

management. The author's prior work, which has been referenced in this editorial (ref. 4), shows how post-prandial glucose elevation is accompanied by elevation in creatinine. However, the author does not show how this elevation is in excess of what would be expected after any normal meal. It has clearly been established that creatinine is known to rise after meals (Jacobsen FK, et al. Postprandial serum creatinine increase in normal subjects after eating cooked meat. Proc. EDTA. 1979;16:506). Therefore, it is no surprise that the author was able to show an increase by 4-8% in patients' creatinine 2 hours following a meal. Also, patients whose 2hPPG rose to >200 had a greater increase in creatinine compared to those with 2hPPG <200 mg/dl. However, no adjustment was made for calories consumed or amount of protein/meat consumed. Without such an adjustment, it would be erroneous to attribute all the rise in creatinine purely to adequacy of glycemic control. The author's prior work linking delta-glucose to "renal function changes" purely relies upon the premise that creatinine rise 2 hours following a meal is indicative of a change in renal function. It must be noted, however, that the creatinine is merely a surrogate marker for renal function. Its level in blood depends upon protein ingestion and tubular secretion. The author has not provided any evidence to show that delta-glucose is associated with any longterm outcomes vis-a-vis renal function. The author has also not provided any data to show that the rise in creatinine is sustained beyond the near post-prandial period (e.g. 3-4 hours). I would argue that a fasting creatinine checked the following day would be the same as the fasting creatinine during the initial assessment. This would argue against any longterm effects of delta-glucose on renal function. The 2hPPG suffers from being non-standardized in terms of nutrient distribution, glycemic index, fiber content, and caloric load, which could produce wide variations in the glucose readings 2 hours following a meal. The author does not provide any convincing arguments to suggest that 2hPPG is in any way superior to HbA1c in predicting renal function or in managing diabetes.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

ESPS manuscript NO: 16288

Title: In treating diabetes, what is important? Glucose levels or outcome measures?

Reviewer's code: 00506276

Reviewer's country: Poland

Science editor: Yue-Li Tian

Date sent for review: 2015-01-10 14:09

Date reviewed: 2015-02-11 04:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

This is an editorial article in which relevance of measuring 2-hour postprandial glucose level for the management of diabetes is discussed. The author implies that intensive insulin therapy reduces 2hPPG and inhibits the decline in renal function in diabetic subjects. In addition, unbeneficial effect of ACEI and ARBs on renal function are discussed. The paper is well-written and will be interesting for broad research and clinical community.

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Diabetes

ESPS manuscript NO: 16288

Title: In treating diabetes, what is important? Glucose levels or outcome measures?

Reviewer's code: 00506298

Reviewer's country: Spain

Science editor: Yue-Li Tian

Date sent for review: 2015-01-10 14:09

Date reviewed: 2015-02-21 18:49

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<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"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		[Y] No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

The Mandal editorial has as objective reveal which glycaemic parameter is the most predictive of renal function outcome. This is an interesting paper that call attention on the importance of outcome measures. However, the author' should clarify the meaning of a phase in page 3, last paragraph, first line, "The advance trial involved 11, 140 patients....." that is not easy to understand