



SDI Review Form 1.6

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| Journal Name: | <u>British Journal of Medicine and Medical Research</u> |
| Manuscript Number: | Ms_BJMMR_29418 |
| Title of the Manuscript: | Follow up Type 2 diabetes mellitus: a comparison between intensive diet, physical exercise and lifestyle intervention with medication controlled management |
| Type of the Article | |

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

| | Reviewer's comment | Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here) |
|-------------------------------------|--|--|
| Compulsory REVISION comments | <p>Running title is too long.</p> <p>Abstract , In Results mention about comparison to intensive dietary and lifestyle interventions.</p> <p>Subjects and methods: Laboratory measurements Subjects reporting a history of DM and currently taking oral medications for diabetes were considered to have DM. DM was defined according to the WHO 1999 expert group [2] Physical examination and measurements Patients enrolled were new Type 2 Diabetes according to ADA criteria [13].</p> <p>Better if you follow any one criteria</p> <p>Mention in detail about conventional therapy (dietary restriction) or intensive therapy</p> <p>Aim: Study aims to find if twelve months of treatment of severe hyperglycemia with oral antihyperglycemic agents was enough to achieve targeted HbA1c in patients with incident T2DM in comparison to intensive dietary and lifestyle interventions.</p> <p>In tables the mentioned objective was not satisfied Tables shows comparison between genders, not between conventional therapy (dietary restriction) and intensive therapy</p> | <p>1. We have amended title of the manuscript</p> <p>2. We have corrected abstract section accordingly.</p> <p>3. We have revised DM definition criteria according to the ADA criteria.</p> <p>4. Subjects located in each group as follows: diet, lifestyle, physical exercise n= 556; metformin n=617; sulfonylurea n=139 and sitagliptin n=74 patients</p> <p>5. A total of 1386 patient were available during follow up and included in the study and we have removed 464 patients either lost follow up or they had incomplete information.</p> <p>6. Participants were classified for comparison to one of two interventions: either to medication therapy or an intensive physical exercise and lifestyle modification program. Goals for intensive physical exercise and lifestyle modification program participants were to achieve and maintain a reduction of $\geq 7\%$ of initial body weight through a calorie-controlled, low-fat diet and to engage in physical activity of moderate intensity, for ≥ 150 min per week. T2DM Patients enrolled to study according to ADA criteria. 1386 were approached and assigned to receive either conventional therapy (dietary restriction) or intensive medical therapy (metformin, sulfonylurea, sitagliptin) for glucose control and available for the analysis of the changes with intervention at over 1 year. All patients were</p> |



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| | <p>Rewrite the discussion Compare your finding with other's results.</p> <p>Title does not match with study findings.</p> <p>Clearly mention weather your comparing between conventional therapy (dietary restriction) and intensive therapy or between genders</p> <p>References 6. Bener A, Kim E, Mutlu F et al. Et al should after three or six authors(See the guidelines for authors)</p> <p>Consult epidemiologist for type of study</p> | <p>initiated on diet, lifestyle, physical exercise n= 556 patients, metformin n= 617 patients (generic 1000 mg twice daily after gradually build-up dose over 2 weeks) and/or sulfonylurea n=139 (usually glimepiride 4 mg daily) patients or sitagliptin 100 mg daily which was used for a minority of patients n=74.</p> <p>7. We have re-stated conclusion very clearly.</p> |
| <u>Minor</u> REVISION comments | | |
| <u>Optional/General</u> comments | | |