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SDI Review Form 1.6

Journal Name:	British Journal of Medicine and Medical Research
Manuscript Number:	Ms_BJMMR_26276
Title of the Manuscript:	THE METABOLIC SYNDROME IN ADOLESCENTS AGE 11-18 YEARS WITH FAMILIAL HISTORY OF EARLY ONSET TYPE 2 DIABETES (T2DM)
Type of the Article	Original Research 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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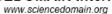


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PART 1: Review Comments

	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	 1- Abstract needs a one line background about your topic. 2- Sample size is very small (25 adolescents) compared to Thirty two (32) adolescents of similar age and BMI without familial history of diabetes served as controls. 3- You said "chronic metabolic conditions" please clarify like what. 4- You said "Met_{SIFG} which does not include insulin resistance and the MetS_{HOMA}" please mention full words before abbreviation. 5- You said "A secondary analysis of the prevalence rate" please can you explain this. 6- Please add reference for Helsinki Declaration of 1975. 7- You did not mention BMI calculation in 	
	methodology. 8- You concluded "MS in adolescents can translate into atherosclerotic processes in later life" this is	

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	not your conclusion.	
	9- You said "There was a positive correlation	
	between LGA at birth and abdominal obesity in	
	adolescents "please mention r and p or add	
	correlation diagram	
	10- Reference 1o, 15 mention year of journal.	
Minor REVISION comments	1- In introduction you said "Studies have shown an	
	association between MS and family history of	
	T2DM in children and adolescents [6,7]." Can you	
	mention what your work added?	
Optional/General comments		

Reviewer Details:

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Created by: EA Checked by: ME Approved by: CEO Version: 1.6 (07-06-2013)