



SDI Review Form 1.6

Journal Name:	International Journal of Biochemistry Research & Review
Manuscript Number:	Ms_IJBCRR_29409
Title of the Manuscript:	Early screening of type 2 diabetes mellitus patients for micro-albuminuria and its relationship with diabetic retinopathy
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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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	The manuscript shows that in a type 2 diabetic population of the North India the prevalence of normoalbuminuria is 41%, the prevalence of microalbuminuria is 41.8% and the prevalence of macroalbuminuria is 17%. Looking at the presence of diabetic retinopathy (DR), 13.8% of the normoalbuminuric patients were affected by DR, 33.9% of the microalbuminuric patients were affected by DR and 57.5% of the macroalbuminuric patients were affected by DR. Comments to the manuscript are: 1) The development of diabetic nephropathy is always preceded by the appearance of DR. In this population only a fraction of patients affected by micro and macroalbuminuria are also affected by DR suggesting that by micro and macroalbuminuria in DR-free patients are the consequence of non-diabetic renal diseases. The Authors should discuss this point in the discussion section and suggest how it will be possible to make a correct diagnosis in these patients. The risk is indeed to treat patients with nephropathies independent on diabetes with drug specific for diabetic nephropathy. 2) Diabetic retinopathy should be staged according to the ETDRS classification	Authors are thankful to reviewer for this suggestion. As suggested we have included a discussion on NDRD patients in the study. (Line; 230-237).



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	Please clarify the ethical issue: It is unclear whether the study was approved by an Ethics Committee and if the patients gave their informed consent.	Authors are thankful to reviewer for this suggestion. In our study we have been mentioned overall PDR cases instead of early PDR, High risk PDR, Advanced PDR and clinically significant Macula Edema. The relevant examinations were completed by an ophthalmologist and the patients were categorized according to the degree of their retinopathy as No diabetic retinopathy (NDR), Mild Non-proliferative Diabetic Retinopathy (NPDR), Moderate NPDR, Severe NPDR, Proliferative diabetic retinopathy (PDR). As per the guideline of manuscript submission we have mentioned already the consent and ethical approval under these headings. However, now as per suggestion of the reviewer, we are including ethical approval and consent in the text under material and methods. (Line; 92-94).
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		