OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Clinical and Biochemical Characteristics and Treatment Outcomes of Ketosis-Prone Diabetes: The Remission Prone Diabetes"

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Review Timeline:

Submit Date:	1 Jul 2020
Revised Date:	22 Nov 2020
Accepted Date:	1 Feb 2021

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) — 19 Aug 2020

Dear AE,
The manuscript needs English language editing.
PLEASE SEE THE ATTACHED FILE FOR MORE COMMENTS.
Thanks.

REFEREE: Associate Editor | **Revision** (0) — 8 Oct 2020

Dear EIC,
Ketosis prone diabetes is a well-known and uncommon subgroup of diabetes with many published case reportsbut due to long-term follow up can be accepted after revision.
1. Page 1: Please delete lines 10 and 11 of the Abstract, because they have been repeated in the results
2. Introduction (Page 3) should be cut in half and should contain the most pertinent issues in the background and aims of the study.
3. Page 4, Results: In the first paragraph of the Results, please delete all percentages, two/third, etc. You had only 6 patients and you should describe every finding by numbers and should not use percentages.

4. Table 1: Please omit rows on blood pressure, goiter, polyurea and polydypsia. Add (yr) after Age and delete all words after Graves' disease.
5. Table 2: Add blood before PH; for all + and – omit" ve".
6. Table 6: You should use units/day and weeks in rows 1 and 3 in the first column and omit all of them in the other columns; please omit rows 4 and 5 (insulin required … and index DKA- …) and explain them in a sentence under the table.
7. Discussion: Is too lengthy, please shorten it to the volume of one page.
Regards

REFEREE: EIC | **Revision (0)** 8 Nov 2020

Dear Author,
Your article is reviewed by the reviewers carefully. According to their comments, this document needs minor revision. Please follow their comments as requested.
Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Reply to Reviewer 1:

The changes suggested are made as per understood and marked In PDF.

Grammar and typos corrected

Reply to Reviewer 2:

The changes suggested are made as per understood and marked In PDF.

Reply to AE:

- *Page 1: Please delete lines 10 and 11 of the Abstract, because they have been repeated in the results*- changes made
- *2. Introduction (Page 3) should be cut in half and should contain most pertinent issues in background and aims of the study*.-rephrasing done and length reduced
- 3. *Page 4, Results: In the first paragraph of the Results, please delete all percentages, two/third etc. You had only 6 patients and you should describe every finding by numbers and should not use percentages*.-changed made as suggested
- 4. *Table 1: Please omit rows on blood pressure, goiter, polyurea and polydypsia. Add (yr) after Age and delete all words after Graves' disease*.-rows deleted
- *5. Table 2: Add blood before PH; for all + and – omit"ve"*. - "ve" removed
- *Table 6: You should use units/day and weeks in rows 1 and 3 in the first column and omit all of them in the other columns; please omit rows 4 and 5 (insulin required … and index DKA- …) and explain them in a sentence under the table*.- changes made as per suggested and understood
- *Discussion: Is too lengthy, please shorten in to the volume of one page*- reduction in words done

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (1) 13 Jan 2021

Dear EIC,
As I mentioned before, ketosis prone diabetes is a well-known and uncommon subgroup of diabetes with many case reports. This case series has no novelty but due to long-term follow-up can be accepted.
Regards

Fereidoun Azizi & Dr. Azita Zadeh-Vakili: EIC | **Revision** (1) 1 Feb 2021

Dear Author,
The document is reviewed carefully by the reviewers. According to their comments and your revisions as requested, this manuscript is accepted.
Thanks.