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OPEN PEER REVIEW

Glycemic Profiles and Hypoglycemia Awareness Among Pregnant Women with Gestational and Pre-existing Diabetes Referred to a Tertiary Center in Sulaimaniyah-Iraq in 2024

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

More about open peer review: brieflands.com/knowledgebase/opr

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1 Original submission

2 comments · 3 Sep 2024 – 24 Sep 2024

Marzieh Saei Ghare Naz Reviewer

MAJOR REVISION 3 Sep 2024

I am writing to express my opinion regarding the manuscript titled " Glycemic Profiles and Hypoglycemia Awareness Among Pregnant Women with Diabetes Referred to a Tertiary Centre", which was recently submitted to International Journal of Endocrinology and Metabolism. Having thoroughly reviewed the manuscript, I would like to express my view that it is not suitable for publication until the major concerns have been addressed. (Need Major revision)

My comments

The text needs to be edited by a native English speaker.

The sample size should be clearly stated in the abstract.

Which statistical tests were used? Briefly describe them in the abstract.

Is the insulin requirement presented as mean (SD)?

As I see it, in the introduction section, citations appear only at the end of each paragraph. Please add citations for each sentence.

To improve the introduction section, I suggest adding the results of previous studies about glycemic profile awareness.

What type of study is this?

There is no information on the power of this study in the methods section.

The details of the assessment of awareness should be added.

What is the definition of glycemic profile in this study?

How is the normality of the data assessed?

What was the response rate in this study?

The first sentences of the results section are too long and need to be edited by a native English speaker.

The presentation of the results is not clear. For example, are they reported as mean (SD) or as other values?

The first paragraph of the discussion should comprise a summary of the results.

The discussion section should be organized based on the main findings, paragraph by paragraph.

Please avoid using statistical language such as reporting p-values in the discussion section.

Referee 1 Reviewer

MAJOR REVISION 24 Sep 2024

I reviewed the manuscript entitled “Glycemic Profiles and Hypoglycemia Awareness Among Pregnant Women with Diabetes Referred to a Tertiary Centre.” This descriptive study, conducted in 2024, focuses on diabetes in pregnant women in Sulaimaniyah, Iraq. Given the limited data available from developing countries in the Middle East, which has one of the highest diabetes prevalence rates globally, the findings of this study are valuable for readers. However, I have several concerns that should be addressed before this study is presented in the IJEM.

Title: The title of a descriptive study should clearly include the location (Sulaimaniyah, Iraq) and the year (2024) to provide context.
Objective: The stated objective of the study is “To observe glycemic profiles (GP) and hypoglycemia awareness (HA) in women with HIP.” This indicates a descriptive nature; however, the comparison between different types of diabetes (Type I vs. Type II vs. GDM) is not central to the study's hypothesis and may detract from its main findings. Therefore, results comparing these diabetes types should not be emphasized in the abstract but can be included in the main text.
Setting and Sample Size: The abstract should report the setting of the study (e.g., Maternity Teaching Hospital) and specify the sample size.
P-values: The interpretation of p-values should be clarified; stating “p≤0.001 as highly important” is misleading since p-values do not inherently indicate the importance of an association.
Reporting Age: It would be beneficial to report both the mean (standard deviation) age of participants and age categories for clarity.
Blood Glucose Records: The statement regarding “Total number of 7055 BG levels recorded by the study participants, averaging 68.49 records per patient” raises questions about the period covered by these records. Were these data collected throughout the entire pregnancy?
Hypoglycemia Awareness Definition: The definition of “awareness of hypoglycemia” should be clearly articulated in the Methods section to avoid ambiguity.
Discussion Structure: The first paragraph of the discussion should focus on summarizing the main goal and novelty of the study along with a summary of results. Subsequent paragraphs should delve deeper into these findings. Additionally, strengths and limitations should be discussed prior to concluding remarks. Furthermore, there is no discussion on the generalizability of the results.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Chief Editor; warm greeting.

I appreciate the time and effort you and the reviewers dedicated to providing feedback on the manuscript entitled "Glycemic Profiles and Hypoglycemia Awareness Among Pregnant Women with Gestational and Pre-existing Diabetes Referred to a Tertiary Centre in Sulaymaniyah Province, Iraq in 2024",

Thanks for allowing me to submit the revised draft of the manuscript. Here are the responses point by point.

REVIEWERS COMMENT		**ANSWER**
	Reviewer 1:	
1.	The text needs to be edited by native English speaker.	Dear Reviewer, thanks for the comment. Your suggestion is well considered. The manuscript has been proofread.
2.	The sample size should be added in abstract clearly.	Dear Reviewer, thanks for the comments. The sample size has been added line 21 page 1.
3.	Which statistical tests were used, briefly add them in abstract.	Dear Reviewer, thanks for the comment. They are added lines 18-20 page 1.
4.	Is the insulin requirement presented as mean (sd)?	Dear Reviewer, thanks for the comment. Both mean (sd) and median are presented.
5.	As I see, in the introduction section, just at the end of each paragraph, there are some citations. Please add citations for each sentence.	Dear Reviewer, thanks for the comment. Your valuable suggestion is applied.
6.	To improve the introduction section, I suggest adding the result of previous studies about glycemic profile awareness.	Dear Reviewer, thanks for the comment. Your valuable suggestion is applied and a section has been added lines 13-17 page 3.
7.	What type of study?	Dear Reviewer, thanks for the comment. it is a prospective observational comparative study.
8.	There is no information on the power of this study in the method section.	Dear Reviewer, thanks for the comment. It has been added to the method section lines 7-8 page 6. The study had a power of 80%, meaning it was sufficiently powered to detect a significant difference with a sample size representing 44 of each group (GDM and preexisting diabetes)
9.	The detail of assessment of awareness should be added.	Dear Reviewer, thanks for the comment. The detail is added lines 14-19 page 5.
10.	What is the definition of glycemic profile in this study?	Dear Reviewer, thanks for the comment. The glycemic profiles

		reflected mean blood glucose levels at pre- and post-meals and the proportion of eu-, hypo-, and hyperglycemic records. Line 12-13 page 5.
11.	How is the normality of data assessed?	Dear Reviewer, thanks for the comment. it is added to the method section line 28 page 5. The normality of the data was assessed using the Kolmogorov-Smirnov and Shapiro-Wilk tests. Normally distributed continuous variables were expressed as mean and standard deviation (SD).
12.	How was the response rate in this study?	Dear Reviewer, thanks for the comment. Out of 109 patients, 103 responded, i.e. response rate is 94.49%.
13.	The first sentences of the result are too long and need to be edited by native.	Dear Reviewer, thanks for the comment. It is edited and shortened.
14.	The presentation of results is not clear, for example they reported as mean (SD) or other values?	Dear Reviewer, thanks for the comment. Differences in means between two groups were evaluated using an independent t-test, while one-way analysis of variance (ANOVA) was used for comparisons among three or more groups. For non-normally distributed continuous variables, data were summarized using the median and interquartile range (IQR). The Mann-Whitney U test was employed to assess differences between two groups, and the Kruskal-Wallis test was used for comparisons among three or more groups. Categorical data were presented as frequencies and relative frequencies. Chi-square and Fisher's exact tests were applied to examine differences between categorical variables across the study groups. Line 30, page 5 and Lines 1-6 page 6.
15.	The first paragraph of discussion should comprise the summary of results.	Dear Reviewer, thanks for the comment. It has been added lines 1-7 page 12.
16.	The discussion section should be organized based on main findings, paragraph by paragraphs.	Dear Reviewer, thanks for the comment. Your valuable suggestion is well considered.
17.	Please avoid using statistical language such as reporting p-value in the discussion section.	Dear Reviewer, thanks for the comment. Your valuable suggestion is well considered.

	Reviewer 2	
1.	Title: The title of a descriptive study should clearly include the location (Sulaimaniyah, Iraq) and the year (2024) to provide context.	Dear Reviewer, thanks for the comment. The location and year of the study have been added to the title
2.	Objective: The stated objective of the study is “To observe glycemic profiles (GP) and hypoglycemia awareness (HA) in women with HIP.” This indicates a descriptive nature; however, the comparison between different types of diabetes (Type I vs. Type II vs. GDM) is not central to the study's hypothesis and may detract from its main findings. Therefore, results comparing these diabetes types should not be emphasized in the abstract but can be included in the main text.	Dear Reviewer, thanks for the comment. Upon reviewing your suggestion, I agree that clarifying the focus of the study would enhance its clarity. The primary aim of this study was indeed to **compare** the glycemic profiles (GP) and hypoglycemia awareness (HA) between women with **GDM** and **pre-existing diabetes**. The comparison between different types of diabetes (Type 1, Type 2, and GDM) is also important. Therefore, in response to your suggestion, I have revised the objective statement to better reflect this focus. The updated objective now reads: **"To observe and compare glycemic profiles (GP) and hypoglycemia awareness (HA) in women with GDM and pre-existing diabetes."** This revision ensures that the study’s intent is clear and that the comparison between different types of diabetes remains part of the analysis but not the primary emphasis. Thanks
3.	Setting and Sample Size: The abstract should report the setting of the study (e.g., Maternity Teaching Hospital) and specify the sample size.	Dear Reviewer, thanks for the comment. Your valuable suggestion is well considered. Lines 15, 21 page 1.
4.	P-values: The interpretation of p-values should be clarified; stating “p≤0.001 as highly important” is misleading since p-values do not inherently indicate the importance of an association.	Dear Reviewer, thanks for the comment. Your valuable suggestion is well considered.
5.	Reporting Age: It would be beneficial to report both the mean (standard deviation) age of participants alongside age categories for clarity.	Dear Reviewer, thanks for the comment. Your valuable suggestion is well considered. It has been added.
6.	Blood Glucose Records: The statement regarding “Total number of 7055 BG levels recorded by the study participants, averaging 68.49 records per patient” raises questions about the time duration for	Dear Reviewer, thanks for the comment. To clarify, the 7055 blood glucose records were collected over one month. In line with **ADA** and **NICE**

	these records. Is this data collected throughout the entire pregnancy?	guidelines, pregnant women with diabetes on metformin or long-acting insulin should test at least four times daily, and those on multiple insulin injections six times daily. Therefore, participants were expected to record at least four times per day (28 records per week, up to 112 per month). Only those with at least one week of data were included.
7.	Hypoglycemia Awareness Definition: The definition of “awareness of hypoglycemia” should be clearly articulated in the Methods section to avoid ambiguity.	Dear Reviewer, thanks for the comment. Your suggestion is well considered. It is added to the methods lines 14-19 page 5.
8.	Discussion Structure: The first paragraph of the discussion should focus on summarizing the main goal and novelty of the study along with a summary of results. Subsequent paragraphs should delve deeper into these findings.	Dear Reviewer, thanks for the comment. Your suggestion is well considered. It has been added lines 1-7 page 12. The subsequent paragraphs discussed the findings deeply in respect to that.
9.	Additionally, strengths and limitations should be discussed prior to concluding remarks.	Dear Reviewer, thanks for the comment. It has been edited as suggested.
10.	Furthermore, there is no discussion on the generalisability of the results.	Dear Reviewer, thanks for the comment. your valuable suggestion has well considered. It has been added lines 18-24 page 15.

Kind regards,
JS

2 Revision 1

0 comments

No public comments in this round.