Author's response to reviews

Title: High-normal blood pressure and long-term risk of type 2 diabetes: 35-year prospective population based cohort study of men.

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Author's response to reviews: see over
Authors responses to the reviewer’s comments:

1. Associate Editor comments:

"The authors have done an excellent job addressing all concerns. The authors present some new analysis but do not include it in the manuscript. I suggest to saki them to add in supplementary appendix, does BMC support this?

Authors reply:
We have up-loaded the analysis as additional files as suggested. We refer to these analyses in the text.

Rephrased text in Results page 10:
.... (table 3 as supplement).

2. On page 15 and 12, the authors addressing Reviewer 2 point 5, provides in their discussion suggestions to practitioners based on their findings. Although the findings are important it is still too early to suggest shift in medical practice and other study designs should address the clinical impact of those decisions. The authors should say that: further studies are needed to assess clinical impact of their findings and whether physicians should consider high-normal BP patients for intense diabetes screening."

Authors reply:
We agree with the reviewer that it is too early to change recommendations to physicians and more studies are needed to assess the clinical impact of our findings. We have rephrased the text accordingly.

Rephrased text Discussion page 12:
The benefits of considering high-normal blood pressures as a predisease have been debated [24]. Whether this should be labeled predisease or not may not be the issue here, however, but what this and other studies [10-13] show is that the risk of developing diabetes is already increased at blood pressure levels below the limits generally used in considering treatment for hypertension. The clinical impact of these findings should be further analyzed in appropriate studies.

Rephrased text Conclusion page 15:
In conclusion, the present study has shown that hypertension and high-normal systolic blood pressure at mid life is a significant risk factor for type 2 diabetes in men over a 35-year follow-up period. The association between blood pressure and type 2 diabetes was independent of BMI and other conventional risk factors. Even so, further studies are needed to assess clinical impact of these findings and whether physicians should consider high-normal blood pressure patients for intense diabetes screening.