Author's response to reviews

Title: Insufficient early detection of peripheral neurovasculopathy and associated factors in rural diabetes residents of Taiwan: A cross-sectional study

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Author's response to reviews: see over
Dear editor and reviewers,

Many thanks for the helpful comments. We have followed the reviewer’s comments. Please see the changes in red font. We have had the article edited by a native English-speaking editor before this submission.

For reviewer 1:

Thank you for your comments, especially for the appreciation that this paper is important.

1. Regarding to add “in Taiwan” to the end of the title of the study...
   
   *Ans.* Thank you, we have re-edited the title on p1 with red font.

2. In background page 3: Line 3“the prevalence of T2DM increases from 3.5% to 9.2%” - is this trend similar to that in other developed countries or worse? Line 4, “4th common causes of death” – do you refer to it as in Taiwan or in the US? In the beginning of the 2nd paragraph, “5%”: it needs a reference for this claim. Line 5 of the 2nd paragraph, “30% to 50%”: does this range refer to the Taiwanese population?
   
   *Ans.* We have re-edited the background on p3 with red font.

3. Page 4: rural regions – please add “in Taiwan” at the end of this sentence. The last few sentences on hypotheses: Please specify your hypotheses with reference to Taiwan. Although those are well known facts, we do not know whether they apply to those residents in the rural regions of Taiwan.
   
   *Ans.* We have re-edited the background on p4 with red font.

4. Page 6: Cardio-Vision model (MS 2000) of the ABI device: please specify the name of the company and its address.
   
   *Ans.* We have provided more information in the manuscript on p6 with red font.

5. Page 9, last paragraph, line 4: what is the total score of T2DHP?
   
   *Ans.* The total score of T2DHP is the sum of six subscales, including taking exercise, reducing risk factors, enjoying life, stress management, taking health responsibility,
and adopting a healthy diet. The total score of T2DHP ranged from 28-140.

6. In discussion: Page 10: In the beginning of the 2nd paragraph, a different citation format was used. Please be consistent. Line 4: what is the cut-off score of MNSI for this current study? Lines 5-6: need a citation to support your claim. Last four sentences: Please explain why your study did not use the TBI (Toe brachial Index)?
   Ans. Thank you so much. We have re-edited on p10 with red font.

7. Page 11, first paragraph, lines 7-8: About 100% of the people (n =49) suffered from neuropathy, but this only pertains to 49 individuals. Several sentences need to be more specific with reference to the Taiwan area. “67% HbA1C…, 70% SBP” – this sentence did not make sense…
   Ans. We have re-edited the discussion section on p11 with red font.

8. Reference: Is Reference # 15 just an abstract? How is this current study different from ref. #15?
   Ans. The purpose of reference #15 was to explore whether the application of MNSI or a new index, based on the optimal scaling combination of MNSI and age (OSC), increases the area under ROC curves (AUCs) for assessing the risk of DFP in the elderly in Taiwan compared to KC and TRC. The current study is different from ref. #15 in many dimensions, for example (1) different cohort samples, (2) different study purposes and measurement with different institutional review board. Reference #15 and current study are all our serious work from 2009~2012 by the same research team.

9. This manuscript requires substantial editing by an English-speaking individual due to a number of significant grammatical errors…
   Ans. Thank you. We have had the article edited by a native English-speaking editor before this submission.
10. Minor essential revisions: Table 1: Change the title to “demographics”? Change the term “Flat region” to “plain region”? Table 2.1 : To add “%” to all the numbers inside the brackets to enhance clarity?

Ans. Thank you so much. We have reedited on table 1 and table 2 with red font.

For reviewer 2:

Thank you for your comments and especially for the appreciation on the paper with interesting.

1. In table 1 number of patients taking OAD is 401 while patients taking OAD plus Insulin is 400. How this is possible when total no. of patients is 404. Please correct.

Ans. Thank you. Sorry about the mistake. We have corrected the table 1 with red font.

2. Regarding the result and discussion is too lengthy and repeated again and again in tables as well as in the manuscript.

Ans. We have reedited the result and discussion section with red font.

For reviewer 3:

1. Regarding the determination of sample size is not clear… If they wanted to have enough power to detect an odds ratio of 1.3, they should state also the estimated exposure rate in both groups as well as the accuracy….

Ans. Thank you. We have re-written this part in the section of sample and setting with red font.

2. Regarding the logistic regression method (forward, enter), as well as the p-value they consider for entering a variable into the model, as well as the criteria for selecting relevant confounders.

Ans. Thank you. We have clarified this issue in the analysis section with red font.