Reviewer’s report

Title: Clinical features, predictive factors and outcome of hyperglycaemic emergencies in a developing country.

Version: 2 Date: 5 January 2009

Reviewer: Moses S Elisaf

Reviewer’s report:

Even though the authors tried to answer the reviewers’ comments, I think that the revised manuscript has not been adequately improved.

Specific comments:
# The age-related criteria for the diagnosis of type I and type II are arbitrary
# It is rather surprising that there was not statistically significant difference in the mean age of patients with type I vs type II DM.
# It is well known that the majority of patients with type II DM exhibits hypertension. Thus, the low prevalence of hypertension (31%) in this group of patients is not well understood and needs further explanation.
# The criteria for the diagnosis of DKA are not clear. The patients with DKA should exhibit increased anion gap (>10mEq/L) acidemia (Ph<7.30, HCO3- <18 mEq/L) with ketonemia or ketonuria (Reference 9)
# Serum creatinine levels were not measured. Azotemia is not a valuable marker of renal function, but it may be related to volume contraction.
# “The lowest duration of DM was associated…” (page 6). A not well defined statement.
# More details concerning the logistic regression analysis are necessary
# The authors should further discuss the coexistent metabolic (electrolyte) abnormalities of their patients.

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: Yes, and I have assessed the statistics in my report.

Declaration of competing interests:
'I declare that I have no competing interests'