Author’s response to reviews

Title: Efficacy of pre-exercise low-level laser therapy on isokinetic muscle performance in individuals with type 2 diabetes mellitus: Protocol for a double-blind randomized controlled trial

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Author’s response to reviews: see over
COVER LETTER FOR SUBMISSION OF MANUSCRIPT

Trials Editors-in-Chief

Subject: SUBMISSION OF A MANUSCRIPT FOR EVALUATION

Title: “Efficacy of pre-exercise low-level laser therapy on isokinetic muscle performance in individuals with type 2 diabetes mellitus: study protocol for a randomized controlled trial.

Dear Editor,

I, Cid André Fidelis de Paula Gomes, corresponding author of the manuscript, entitled: “Effect of low-level laser therapy on pain, quality of life and sleep in patients with fibromyalgia: study protocol for a randomized controlled trial”. Usually the requests of the reviewers.

Editorial request:

1. Please ensure the title conforms to journal style for study protocol articles. The title should follow the format “__________: study protocol for a randomized controlled trial.”

The new title is: Efficacy of pre-exercise low-level laser therapy on isokinetic muscle performance in individuals with type 2 diabetes mellitus: study protocol for a randomized controlled trial.
2. Please modify your Authors? Contributions section to demonstrate that each author meets all three of the following criteria to qualify for authorship (each author should be mentioned individually):

All cited authors participated in these steps. Now follow the guidelines and modified the format of authorship.

CAFPG: conception and design, data collection and analysis, manuscript writing and final approval of the manuscript. DABG: conception and design, financial support, manuscript writing, final approval of manuscript. YH: data collection and analysis, critical revision and final approval of the manuscript. FP: data collection and analysis, critical revision and final approval of the manuscript. TOG: data collection and analysis, critical revision and final approval of the manuscript. AVDF: data collection and analysis, critical revision and final approval of the manuscript. ECPLJ: conception and design, financial support, manuscript writing, final approval of manuscript. ARO: data collection and analysis, critical revision and final approval of the manuscript. MF: data collection and analysis, critical revision and final approval of the manuscript. FCA: data collection and analysis, critical revision and final approval of the manuscript. AAV: data collection and analysis, critical revision and final approval of the manuscript. PTCC: conception and design, financial support, manuscript writing, final approval of manuscript.

**Reviewer’s report**

**Comments**

The submitted protocol provides a detailed account of the study design and methodology planned. It is well written, easy to understand and therefore allow
replication of the work and comparison with related research. However, some additional considerations might be helpful to rule out possible misunderstandings or misleading conclusions:

1. How will the listed exclusion criteria be determined (self-reporting questionnaire, medical tests, etc.) and which biochemical data will be collected during the initial screening?

Exclusion criteria will be determined by access to medical history of individuals. (Line: 164-169). The blood collection will be performed in the evaluation 1 (line: 118).

2. Patients with liver disease and pernicious anemia for example are known to have elevated levels of activity of LDH. Since LDH activity will be a secondary outcome it might be helpful to extend the exclusion criteria for patients with those conditions?

We agree that there are two conditions that can cause increased LDH. We appreciate the suggestions. We add two conditions to the exclusion criteria of the manuscript (Line 164).

3. Activity of LDH and CK are rather unspecific biomarkers for tissue damage, therefore it might be worth considering to also quantifying the isoenzyme forms which are found predominantly in skeletal muscle?

We agree that. Necause of this we modify the analysis Activity of LDH and CK, will perform the analyzes: CK (CK-MB, CK-MM and CK-BB) and LDH (LHD1,2,3,4,5). Added to the manuscript (Line 269-271).

4. Some Figures of the planned eccentric fatigue protocol and the maximum voluntary isometric contraction of the quadriceps muscle might provide a much easier approach to the stated tests?
We found that only the description of the protocol would be necessary for readers. However, we note that membership of a figure can better illustrate the protocol implementation facilitating their reproduction. Two figures were added to the manuscript. Their subtitles are lines (582-585).

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