Author’s response to reviews

Title: Apolipoprotein E Gene Polymorphism and the Risk of Cardiovascular Disease and Type 2 Diabetes

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Version: 2 Date: 18 Aug 2019

Author’s response to reviews:

Dear editors and reviewers,

We are very grateful to receive your comments on our revised paper (R1) and thinking positive of our corrections made in R1. Here we provided a revised version (R2) according to your advices. Furthermore, the language of manuscript has been improved by detailed grammar check and proofread. Every correction we made has been highlighted in RED in the manuscript. Here is a point-by-point response to the questions raised by reviewers.

Reviewer#1

Asmaa Mahmoud Mohammed, M.D (Reviewer 1): The revised manuscript and authors' response and original points have been addressed.

Respond: We thank Reviewer 1 for being satisfactory with our response and revision.

Reviewer#2

Lupe Furtado-Alle (Reviewer 2): The authors answered properly to this reviewer questions and corrected the pointed mistakes.
Respond: We are pleased that Reviewer 2 thinks positive of our corrections and responses made in our revised version.

Some points still need to be taken into account before publication:

1) The text still needs important language corrections.

Respond: Thanks for your suggestions. We feel sorry for our poor writings. In the R2, we invite a friend who is a native English speaker to help polish our article. We hope the revised manuscript could be acceptable for you.

2) Hardy-Weinberg equilibrium is a test for genotype distribution fitting and not for allele frequencies. Authors should correct the text bearing this distinction in mind.

Respond: Thank you for your value instruction. We have correct the improper text in the title of Table 2.

3) I understood your reasoning regarding the use of cholesterol control drugs, but I think you may be losing some important information inside the patients group. The use of cholesterol control drugs may lead to a bias inside the patients group if you considering that the use of such medicaments may mask the effect of genotypes/alleles. I suggest you try to investigate (statistically) if you are not losing some relevant genetic effect by not correcting for the use of cholesterol control drugs inside the patients group.

Respond: Thank you for understanding of our design that can’t justify for the use of cholesterol control drugs and also thank you very much for your kind suggestion. In this place, you suggested us to investigate if the present study losing some relevant genetic effect by not correcting for the use of cholesterol control drugs inside the patients group. We think in Table 3 we did statistically analyze the relationship between genotypes and T2DM patients with or without CVD, as well as relationship between genotypes and CVD patients with or without T2DM. However, we failed to find any significant difference of genotypes/alleles between patient groups. This may due to the limited number of subjects in the present study. We hope we don’t misunderstand your opinion, and thank you again.