Reviewer’s report

Title: Analysis of factors influencing the frequency of primary care visits among diabetic patients in two provinces in China

Version: 0 Date: 05 Jun 2019

Reviewer: Yanbing Zeng

Reviewer's report:

This study examined the frequency of visits to community clinics for diabetic care services, and explored factors correlated with infrequent visits and identified self-reported barriers. The findings would be important for the study of primary care and chronic disease management in community level. More importantly, the policy-makers in many countries working on primary care reforms could learn from this work to improve certain policies and benefit local patients. The manuscript is generally well written and organized. However, there exist a few problems in the current version. I recommend a major revision.

Background: Please bring about more details on the efforts the two provinces made on diabetic patients management.

Methods: 1) In page 4 line 11, you mentioned the reason for sampling in Shandong and Jiangsu was the representative economic development level. However, both two provinces have been ranking among the top 3 provinces by GDP for years. Similarly, the two sample cities Qingdao and Wuxi you claimed representing the average standards are well above the average. I suggest the authors rethink about the sampling representativeness and generalizability.

2) In page 4 line 50, the authors wrote about maximizing data reliability and validity, however, no metric is provided.

Results: 1) Certain data presented in Table 2 need to be checked. For instance, the sum total of the frequency/proportion of frequent and infrequent visitors under 55 is not equal to 735/48.7. Data given on family history of coronary disease also needs an inspection. 'Sex' might be replaced by 'Gender'.

2) According to Table 2, the average age of respondents was 64.4±10.6, while half of them aged over 55, suggesting that many of the respondents might be old adults. Please give a more detailed age composition. Corresponding modification in multivariate analysis is also recommended.
3) Table 3 and Table 4 in the backward stepwise regression, you listed several covariates adjusted for, are these all? What about history of diabetes ≥10 years, and family history of coronary disease?

4) Another, there is a cutting point below and above ¥2000 when including income in regression, which is different with the 4-category variable you used for descriptive statistics. I suggest to follow the more informative one.

5) In page 6 line 23, you mentioned results in Table 4 only briefly. There is a mistake in both the text and table title, it should be factors contributing to infrequent visitor status rather than frequent. Otherwise, it contradicts with results from Table 3 and the main objective of your study.

Discussion: In discussion, the authors mentioned a set of policy implications of their study. This is of great importance. I suggest to add one or two policy suggestions on telephone follow-up and household visit.

In page 10 line 1, you mentioned 'this is the first study using a multi-community-based general population that documents the utilization of community service in diabetes care', better in a milder tone. There must be similar researches in China. Also, the sampling representativeness and generalizability mentioned above should be considered in limitations.

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript
**Quality of written English**
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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