Reviewer’s report

Title: Trends in Sex Differences in the Receipt of Quality of Care Indicators among Adults with Diabetes: United States 2002-2011

Version: 0 Date: 08 Mar 2017

Reviewer: Giuseppina Russo

Reviewer’s report:

Re BEND-D-16-00194-Trends in Sex Differences in the Receipt of Quality of Care Indicators among Adults with Diabetes: United States 2002-2011

Dear Editor,

Williams et al reported on gender differences in quality of care indicators in a large sample of men and women with diabetes. They found that women had significantly higher odds of receiving specific QoC indicators after adjusting for confounding factors.

The topic is interesting, the results are sound and the manuscript is well-written.

However, some minor issues must be addressed before considering the manuscript for publication.

Minor comments

Introduction:


Results and analysis:

It would also be important to separate the analysis for type 1 and type 2 diabetes, since gender-differences in targets achievement and quality of care indicators have been reported to be different according to the type of diabetes. Furthermore, as shown in table 1, women were more
prevalent in the 18-44 yrs group, suggesting that the "better quality of care" may apply to younger women, more likely to include type 1 diabetes.

If it is not possible to perform a separate analysis according to gender and type of diabetes, then the percentage of subjects with T1DM and T2DM should be reported. If data is not available, this must be included among the limitations of the study and discussed accordingly.

Discussion

Please specify that the better quality of care found in women with diabetes apply to a specific and limited number of indicators, i.e. to visit a doctor, to receive blood pressure checks, eye and foot examinations. Although these are important aspects in the process of care of diabetes, they are not the only ones. Cardiovascular disease risk is particularly high in diabetic women and quality of care indicators should also include smoking habit, lipid profile and renal function.

At variance with data presented here, several lines of evidence indicate that diabetic women are at higher risk of receiving less medications and, overall, of failing to reach recommended targets in spite of a similar quality of care than men. This is an important issue that must be well discussed.

Conclusions must be mitigated "The results of our study are important and provide new information about sex differences in QoC among adults with diabetes" because of the limitations of the cross-sectional and retrospective design and the lack of information on intermediate indicators, that should be acknowledged among the limitations of the study.

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.
I am able to assess the statistics

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

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