Reviewer’s report

**Title:** Successful management of severe diabetic ketoacidosis in a patient with type 2 diabetes with insulin allergy: a case report

**Version:** 0  **Date:** 13 Aug 2019

**Reviewer:** Jonathan Hazlehurst

**Reviewer's report:**

I read with interest this case report concerning the management of DKA in a patient with type 2 diabetes with insulin allergy. Overall I feel it will be of sufficient interest and educational value for consideration though I have a few minor comments to improve the manuscript. It is an interesting case that points out that conventional treatment including IV insulin was tolerated despite the subcutaneous allergy. On the whole my comments relate to SI units and use of person first language. I found this an interesting case that could be of educational use to the readership.

**Title:** Does BMC Endocrine Disorders have a position statement around person first language? I would recommend that in "a patient with type 2 diabetes" is more appropriate than "a type-2 diabetes patient." Also type 2 diabetes should not be hyphenated as type-2 diabetes and this should be changed throughout.

**Abstract:** type 2 diabetes not "type-2" and use person first language. It is my understanding that BMC Endocrine Disorders publishes in SI units and yet non SI units are used throughout this submission. This needs to be clarified with the journal and changed to SI units.

**Case presentation:** Although this is an academic submission from esteemed colleagues from Vietnam I would recommend the use of person first language and the authors may find the English NHS guide helpful https://www.england.nhs.uk/wp-content/uploads/2018/06/language-matters.pdf a useful document. Statements like "suffered from" type 2 DM are fairly old fashioned and instead "lived with" or simply "He had had type 2 diabetes for 16 years" would be preferable.

P8 line 59 "isotonic" 0.9% NaCl is not isotonic and this word should be deleted.

P9 line 12 was this "haemodialysis" or was it in fact haemofiltration. There are case reports of haemofiltration not haemodialysis in treatment resistant DKA. Despite the long list of authors none look to be a renal physician. This needs to be clarified. There is potential that this acidosis may have improved if he was filtered rather than dialysed (Please note this is speculation on my part, I am not a renal physician or an intensivist)

P9 line 24 "isotonic"

**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

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Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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