**Author’s response to reviews**

**Title:** Determinants of deranged thyroid function parameters in children admitted for management of diabetic ketoacidosis/diabetic ketosis

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**Author’s response to reviews:**

Dear Editor:
Thank you very much for considering our manuscript entitled “Determinants of deranged thyroid function parameters in children admitted for management of diabetic ketoacidosis/diabetic ketosis” for publication in BMC Endocrine Disorders. We do appreciate the constructive comments and suggestions of the editor and reviewers, which have improved the manuscript substantially. All items raised have been addressed during the revision, and our point-by-point responses are detailed below.

This revised manuscript has been edited and proofread by Medjaden Bioscience Limited. We hope that this further revised manuscript is now acceptable for publication in your journal and again, thank you for your consideration.

With best wishes,
Yours sincerely,

Guimei Li

Responses to Reviewers
We thank you for the comprehensive and thoughtful review, which has helped improve the manuscript significantly. We have addressed all points raised by the reviewers and revised the manuscript accordingly. All changes, as well as responses to all questions, are detailed below:

Reviewer 1
Lines 8 - 10: "the occurrence of DKA...." has poor grammar, for the editor to address
Line 15 "more severer" is poor English, please fix
Discussion:
Line 5: "-6: The new text from "the results unveiled...": Poor grammar - editor to fix.

Response: Thank you so much for pointing out the issues. Corrections have been made in the revised manuscript (Page 4, Lines 8-10 and Line 15; Page 13, Line 6-7).

Reviewer 2
1. In the Discussion, the section on albumin is improved. The statement "So the absolute lack of insulin in T1DM could account for the reduction of serum albumin and pre-albumin in the present study", needs to be better explained. Everyone in the study had T1DM, I believe the authors are suggesting that those with sick euthyroid might have had more severe insulin deficiency than those who did not. In the case of children who had more longstanding diabetes, the suggestion would be that compliance was worse, or dosing was relatively lower (than required) in the sick euthyroid group.

Response: Thank you so much for the insightful suggestions. Accordingly, we have provided explanations on the relationship between insulin deficiency and reduced albumin or pre-albumin in the revised manuscript (Page 15, Lines 4-12).

2. In the section on limitations "Although the setting of euthyroidism control compensated the weakness partly, the impact of methodology on the outcome might be inevitable. " - I do not know what this means, it should be clarified. The point here, is that if FT3 and FT4 and being measured falsely low because of a methodological flaw, this could lead to overdiagnosis of sick euthyroid syndrome, and therefore misclassification particularly in the marginal cases.

Response: Thank you for the constructive suggestion. Accordingly, we have added more details on the limitations of the current study in the revised manuscript (Page 16, Lines 10-13).

Editor's Notes
1. At this stage, we ask that you submit a clean version of your manuscript and do not include track changes or highlighting.

Response: As required, a clean version of our manuscript has been provided without any track change and highlighting.

2. Please also ensure that your revised manuscript conforms to the journal style, which can be found at the Submission Guidelines on the journal homepage

Response: We have checked the revised manuscript thoroughly and ensured it conforms to the journal style.