Author’s response to reviews

Title: Dietary Fiber Intake and Glycemic Control: Coronary Artery Calcification in Type 1 Diabetes (CACTI) Study

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Dietary Fiber Intake and Glycemic Control: Coronary Artery Calcification in Type 1 Diabetes (CACTI) Study
Arpita Basu; Amy C Alman; Janet K Snell-Bergeon
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Dear Dr. Ley,

We enclose a revised version of our manuscript in which we have responded to the very helpful critiques and comments from the Reviewers. We have highlighted the changes in yellow in the revised manuscript. Please find below a list of the Editorial and Reviewer comments (shown in regular font) and our responses (in bold font), referring to changes using line numbers in the revised manuscript.

Reviewer reports:

Reviewer #5: The revised manuscript by Basu and colleagues entitled "Dietary Fiber Intake and Glycemic Control: Coronary Artery Calcification in Type 1 Diabetes (CACTI) Study" describes a prospective study of patients with T1DM or non-diabetic "controls". The study investigated the association between dietary fibre and glycaemic control using at baseline and 6 years later. Dietary fibre was inversely associated with glycated haemoglobin levels at baseline but not after 6 years in both the people with T1DM and the control population. The manuscript is well written and the analysis and interpretation are on the whole appropriate. The topic is of interest to researchers and the broader population.
Response: Thank You

One minor concern is the authors raise the possibility of trials of fibre supplementation as a seemingly unsupported comment in the abstract "Thus, at observed levels of intake, total dietary fiber reveals modest inverse associations with poor glycemic control. These findings warrant future trials of fiber supplementation in T1D management." and the conclusions "Further research is needed to evaluate whether therapeutic doses of fiber supplementation can improve glycemic control in individuals with T1D or non-diabetic individuals with habitual low fiber intakes." without raising this issue in the discussion (power, definition of habitual low fibre intake, feasibility etc). Given the modest association observed in the minimally adjusted cross-sectional analyses (weaker level of evidence) I suggest being more conservative.

Response: We have now revised these sentences in the Abstract (lines 31-32) and the Conclusion section (lines 195-196) to reflect our findings at the cross-sectional level. Habitual low fiber intake has been previously discussed in lines 150-153 in the Discussion section.

Results page 9 line 118 remove "As expected".

Response: This has been removed in line 118.

Again, we thank the Reviewers for their helpful comments.

Sincerely,

Arpita Basu, PhD, and co-authors.