Author’s response to reviews

Title: Association between long-term exposure to ambient air pollution and prevalence of diabetes mellitus among Malaysian adults

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Version: 3 Date: 18 Dec 2019

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Point-by-point response within the 'Response to Reviewers'

No

Comments

Amendments in the revised version

Editor’s comment

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We appreciate the responses to the reviewer comments. We have some additional concerns. This manuscript has an unusually large number of authors. The section on Authors’ Contributions does not justify this journal's requirement that all authors of the manuscript "are accountable for all aspects of the accuracy and integrity of the manuscript in accordance with ICMJE criteria". Please revise accordingly and provide justification that the ICMJE criteria are satisfied for authors listed in the final version.

We understand your concern with regards to the number of the authorship and would appreciate if you could consider allowing all to be listed as authors due to our prior agreement/consensus before initiation of the analysis. As specified in the ICMJE criteria, all the authors have contributed substantially to the conception or design of the work; or the acquisition, analysis, or interpretation of data for the work; drafted the work or revised it critically for important intellectual content; approved the final version of manuscript to be published; and agreement to be accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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In addition, we are concerned about the use of the term "underdiagnosed" diabetes, as it is not an internationally recognized term. A better term might be "suspected diabetes" or "impaired fasting glucose". The use of a low fasting glucose limit of 6.1 mmol/L is usually considered to reflect impaired fasting glucose and is lower than the more widely accepted recommendation of 7.0 mmol/L as diagnostic criterion. Also, a limit of 11.1 mmol/L is recommended specifically for a two-hour blood sample after glucose ingestion. These issues need to be clarified and taken into account in the data analysis and when drawing conclusions from the findings.

Thank you for highlighting this concern. Just to clarify that underdiagnosed diabetes cases are referring to those who are not aware that they are having diabetes and have fasting blood glucose equal or more than 6.1 mmol/L. The statement has been amended to “Underdiagnosed diabetes
cases reported in the three surveys refer to those participants who are not aware that they are having diabetes and were identified based on the definition of the diagnostic criteria of the World Health Organisation for fasting capillary blood glucose equal or more than 6.1 mmol/L, or non-fasting glucose of more than 11.1 mmol/L [25].”