Reviewer’s report

Title: Defining the gap: A systematic review of the difference in rates of diabetes-related foot complications in Aboriginal and Torres Strait Islander people and non Indigenous Australians

Version: 0 Date: 12 Jun 2017

Reviewer: Shan Bergin

Reviewer's report:

Thank-you for the opportunity to review this paper that highlights an important and under researched aspect of diabetic foot care in Australia. The paper requires some revision prior to being ready for publication. Please see feedback below:

The Abstract seems a little disordered and does not read well - the Abstract on the front page of the document I reviewed is different to the one in the body of the paper? Please ensure the Abstract/s have the required sub-headings included and that the correct information sits under the correct heading. For example that your study results sit under a "Results" heading. Currently one heading in the Abstract is "Main Body"?? In the Background section the sentence "To compare the prevalence of diabetes and related lower limb complications between Aboriginal and Torres Strait islander populations......” is out of place here.

Make it more clear in your Abstract that your requirement is for studies that include an ATSI AND a non-Indigenous group - as written it sounds like you will include any study with EITHER an ATSI OR a non-Indigenous group.

In the Background section reword the comment "diabetes in a more advanced state" as this is not entirely accurate. Diabetes is more a matter of you have it or you don't and most complications arise as a consequence of poor glycaemic control and/or duration of disease. The complications themselves can be at different stages of severity however diabetes usually isn't.

Under data sources the authors report the list of "chronic" complications that they searched for in included studies however pathology such as cellulitis, infection, necrosis and Charcot's(depending on what stage its at) are not chronic conditions but are acute presentations. Clarify?

In Assessment of Study Quality remove 'etc' from the paragraph. Either describe all aspects of STROBE or simply refer the reader to the Figure included.

The authors refer to "pilot tested data extraction forms" - were these developed and validated as part of the study? You should include information on how these were developed and consider including one as a Figure in the paper.
In Characteristics of Included Studies - revise the second last line as "....studies sample sizes range from..." doesn't make sense.

In Rates of Foot Complications in Reported Populations revise "....a 27 fold increase in likelihood of minor amputation in among...choose 'in' or 'among'

Also in this section there is a line that states "Findings of the Fremantle Diabetes Study were inconsistent between study phases" However this is not explained or expanded upon. What were the inconsistencies and is there an explanation for them - how does it impact your findings/results?

Two things to consider for your Discussion section:

1. Consider removing the reference to "social isolation and discrimination" as a causative factor for increased rates of foot complications. Regardless of whether this is true unless there is evidence to support this statement I would remove it as it comes across as more of a political statement than a statement that belongs in a scientific paper. There is sufficient evidence for things such as access and equity impacting on clinical outcomes for these to be included but not so much the other?

2. Can you expand on your discussion around the need for further evidence based culturally appropriate interventions to reduce rates of foot complications in ATSI populations? How do we know that having these strategies in place will significantly impact on clinical outcomes - is there local or international evidence to support this statement? If you consider that for non-Indigenous populations, evidence based models of care have been available and largely accessible for many years, however we still see high rates of amputation and other complications - why? My point being that I believe that stating a need for better clinical care as a stand alone strategy is a bit simplistic and won't necessarily result in the outcomes we would all love to see. I would love to see a more in depth discussion regarding the issues that impact this patient group.

Finally just read the paper over again and ensure it isn't too repetitive. I felt like a read the outcomes repeatedly throughout the paper so it may benefit from a revision with this in mind.

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