



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Pediatrics*

Manuscript NO: 94721

Title: Selenoprotein-p and Insulin Resistance in Children and Adolescents with Obesity

Provenance and peer review: Invited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 06008175

Position: Editorial Board

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer’s Country/Territory: Japan

Author’s Country/Territory: Egypt

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2024-04-13 00:37

Reviewer performed review: 2024-04-19 01:44

Review time: 6 Days and 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

This study examines SEPP1 in obese children. The research topic may be important, but the description in this paper could potentially be confusing. The study selects obese subjects and compares them with non-obese controls to investigate the relationship between SEPP1 and obesity. However, the conclusion suggests that SEPP1 may be a marker of insulin resistance. It's worth noting that some non-obese individuals may have high insulin resistance, and some obese individuals may not (the median HOMA-IR of obese participants in this study is 3.50 [2.10-4.00]). The study's subjects include obese children and non-obese controls, but the gender ratio is not matched. Some readers may have difficulty understanding how to evaluate units such as Z-scores for weight and height and SBP and DBP, which are in centiles. Therefore, a more careful description is needed to determine whether the control group is healthy from Table 1. It seems that the liver function of obese children is within the normal range, similar to controls. However, an examination of the presence or absence of fatty liver disease might be crucial for explaining this phenomenon. Have you not considered this examination? The description of statistical methods is insufficient and unclear. The purpose of analyses in



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Table 4 and Table 5 should be clearly stated. It's unclear what explanatory variables were used. Why were waist circumference and W/H ratio not included in the multiple regression analysis? In Table 6, W/H appears to be the strongest factor associated with SEPP1, but there's no assessment provided. In the Discussion section, there's a lot of listing of previously published papers, but there's no explanation of what sets this study apart or why certain findings occurred. The authors mention that there's no consensus on SEPP1 concentrations in obesity, yet this study is presented as one perspective. If SEPP1 is superior to other markers in assessing insulin tolerance, why isn't it more widely used? What is "insulin tolerance" to begin with?