**PEER-REVIEW REPORT**

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 70411

**Title:** Significance of serum glucagon-like peptide-1 and matrix GLA protein levels inpatients with diabetes and osteoporosis

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer’s code:** 06143777

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer’s Country/Territory:** Italy

**Author’s Country/Territory:** China

**Manuscript submission date:** 2021-11-14

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2021-11-19 09:30

**Reviewer performed review:** 2021-12-01 08:18

**Review time:** 11 Days and 22 Hours

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<tr>
<th>Scientific quality</th>
<th>Grade A: Excellent [ ] Grade B: Very good [ Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish</th>
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<tbody>
<tr>
<td>Language quality</td>
<td>[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection</td>
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<td>Conclusion</td>
<td>[ ] Accept (High priority) [ ] Accept (General priority) [ Y] Minor revision [ ] Major revision [ ] Rejection</td>
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<td>Re-review</td>
<td>[ Y] Yes [ ] No</td>
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Type 2 diabetes mellitus (T2DM) is a systemic metabolic disorder that can cause metabolic abnormalities of many substances, also, patients with T2DM are more likely to have osteoporosis. In this study, to explore the relationships among serum GLP-1 levels, MGP levels, and diabetes with osteoporosis, the general data, bone mineral density index, and bone metabolic markers of the three groups (case group, control group and healthy group) were compared. Authors found that serum GLP-1 and MGP levels of diabetic patients with osteoporosis were significantly decreased and positively correlated with bone mineral density. The manuscript is well researched and well written, and may improve the early detection and intervention of diabetes with osteoporosis, assess the risk of osteoporosis in patients with T2DM, and improve the prognosis of patients. I have only a minor point to discuss. I would suggest authors add a flow chart to show the process of case inclusion and exclusion more clearly. I recommend that the manuscript can be published after a minor editing.
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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 06143757

Position: Peer Reviewer

Academic degree: MD, PhD

Professional title: Associate Professor

Reviewer’s Country/Territory: Canada

Author’s Country/Territory: China

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| Re-review          | [ ] Yes | [ ] No |
SPECIFIC COMMENTS TO AUTHORS

Thank you very much for asking me to review this manuscript by Feifei Xie et al. This is a retrospective study to investigate the relationships among serum GLP-1 levels, MGP levels, and diabetes with osteoporosis. The result of the study is of interest and may help improve evaluate the risk of osteoporosis for patients with T2DM, and improve the prognosis. Overall, this study was well conducted with good methodology and intelligible English. The number of participants in the study is large enough. Furthermore, minor comment that I would to proposed: 1. Title: Proper and cover all the core result from the study. 2. Abstract: Address all the important component from the study. 3. Key words: could cover this study. 4. Introduction: Describe the overall basic knowledge for this study. Moreover, the aim of the study is clear. 5. Method: The present study is methodologically well conducted. 6. Results: The result of this study is of interest. 7. Discussion: The manuscript clearly interprets the finding adequately and appropriately. In addition, the manuscript could highlight the key points clearly. The previous significant paper involved were included in the discussion, I suggest discussing more in this aspect in the discussion part. 8. Illustrations and tables: I congratulate the authors for the captions to the tables very explicative and complete.