

Reponse letter

Specific Comments to Authors:

The abstract clearly states the objective, methods, results, and conclusion, which is commendable. It succinctly presents the study's aim and findings, highlighting significant statistical results that support the thesis. The methodology is well-detailed with a clear description of the study design, including participant selection, division into groups, and nursing methods employed. The discussion insightfully interprets the findings, connecting them back to the broader literature and the study's objectives. It acknowledges the strengths of community public health nursing and suggests plausible mechanisms by which these interventions improve outcomes. In brief, the study is well-conducted and presents important findings that are relevant to diabetes care. With minor revisions, particularly in language, the manuscript would be suitable for publication.

Reply: Thank you very much for your recognition and encouragement of our team's research results.

Editorial Office's comments. Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are provided below:

(1) *Science Editor:*

1 Scientific quality: The authors submitted a randomized controlled trial of the effects of community public health care on treatment outcomes, cognition, and self-management in patients with type 2 diabetes. The topic is within the scope of the journal.

(1) **Classification:** Grade C;

(2) **Summary of the Peer-Review Report:** This concise presentation describes the purpose and findings of the study, highlighting the key statistical findings that support the argument. The study was well conducted and presents important findings relevant to diabetes care. But it is the language that needs to be revised;

(3) **References recommendations:** The reviewer didn't request the authors to cite improper references published by him/herself.

(4) **Manuscript Type:** After verification, the manuscript type has been changed from "Retrospective Study" to "Randomized Controlled Trial".

2 Specific comments

(1) **Country/Territory of origin:** China.

(2) The language classification is Grade B. Please visit the following website for the professional English language editing companies that we recommend: <https://www.wjgnet.com/bpg/gerinfo/240>.

(3) **Manuscript Title:** The title will concisely summarize the main topic of the study, being not overly long (no more than 18 words). Words such as 'exploration', 'research', 'analysis',

'observation', and 'investigation' are to be avoided. The title should not start with 'A', 'An', or 'The' and will not include any Arabic numbers or abbreviations. Please include the core key word in the title. If a title contains a colon, please capitalize the first letter of the first word after the colon. For example: Unexplained fetal tachycardia: A case report.

Reply: Thanks for your kindly reminder. We have modified it. the title is “Community public health care on the treatment effect, cognition and self -management of patients with type 2 diabetes” now.

(4) **Please add the “Running Title”:** A short running title of no more than 6 words should be provided. Abbreviations are permitted. **For example,** Losurdo G *et al.* Two-year follow-up of HCC.

Reply: Greatly appreciate your suggestion. We have added it.

(5) **Please add the “Author contributions”:** The 'Author contributions' passage describes the specific contribution(s) made by each author. The author's names will be listed in the following format: full family (sur)name, followed by abbreviated first and middle names. For example, Bryan L Copple should be revised as Copple BL. A full multi-author example is: Wang CL, Liang L, Fu JF, Zou CC, Hong F and Wu XM designed the research study; Wang CL, Zou CC, Hong F and Wu XM performed the research; Xue JZ and Lu JR contributed new reagents and analytic tools; Wang CL, Liang L and Fu JF analyzed the data and wrote the manuscript; All authors have read and approved the final manuscript.

Reply: Greatly appreciate your suggestion. We have added it.

(6) **Key Words:** "Key Words" does not meet the requirements. The 'Key words' list will provide 5-10 keywords that reflect the main content of the study. Please do not use abbreviations for the keywords (*e.g.*, Ulcerative colitis, not UC). The first letter of each keyword will be capitalized, and each keyword will be separated by a semicolon, with no terminal period. **An example of correct formatting is:** Non-alcoholic fatty liver disease; Alcoholic liver disease; Non-alcoholic steatohepatitis; Insulin resistance; Oxidative stress.

Reply: Thanks for your kindly reminder. We have modified it:

Key words: Community public health care; Type 2 diabetes; Blood sugar control; Self-management ability

(7) **Please add the “Core Tip”.** The Core Tip is a short paragraph that is independent of the content of the Abstract. The 'Core Tip' will provide a succinct summary of the study that outlines its most innovative and important arguments. This section should be less than 100 words. Abbreviations must be defined upon first appearance in the Core Tip. Do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition.

An example of correct formatting is:

In this study, CellChat was employed to infer cell-cell communication, thereby selecting highly active cell groups in immune-related pathways on single-cell RNA-sequencing data. Highly active immune cells were identified by intersecting these groups with B and T cells. Subsequently, significantly differentially expressed genes between highly active immune cells and the remaining cells were incorporated into the Lasso regression model. Ultimately, incorporating genes selected more than 5 times in 10 Lasso regression experiments into a multivariable Cox regression model, 3 genes (stathmin 1, cofilin 1, and C-C chemokine ligand 5) significantly associated with survival were identified to construct a gene signature.

Reply: Greatly appreciate your suggestion. We have added it:

Core tip: The treatment effect, cognition, and self-management changes of T2DM patients after strengthening community public health care. Establish the foundation for the optimization of community health management in the future. Based on this, this study we used two type of Intervention methods and compared Excellent and good blood sugar control rate, and Use the T2DM health cognitive knowledge scale self-made by our center for evaluation, the Self-Management Ability Scale for T2DM Patients designed by Zhenwei Dai to evaluate patients' self-management ability. And the statistics of nursing satisfaction are based on the center's self-made questionnaire to know the satisfaction.

(8) **Reference numbers in the main text.** The author should number the references in Arabic numerals according to the citation order in the text.

The format of in-text citation of references should be [References Number], which should be with no space between “[]” and the preceding word. **Example:** The pathophysiology is thought to be due to an increased arterial flow that leads to secondary hepatocellular hyperplasia[1,2].

If the name of the author(s) of a reference is listed in the sentence, the reference number should be placed immediately after the author(s) of the reference. **Example:** Mandal *et al*[8] proposed that retractor aponeurosis disinsertion is the most likely cause of congenital low lid entropion.

In addition, please verify the order and total number of references cited to ensure that all references in the list are cited and in a correct numeric order.

Reply: Thanks for your kindly reminder. We have checked and modified it.

(9) Please provide the PMID numbers (<https://pubmed.ncbi.nlm.nih.gov/>) and DOI citation numbers (<https://doi.crossref.org/simpleTextQuery>) to the reference list and list all authors of the references. If a reference has no PMID and DOI, please provide the source website address of this reference.

To ensure the accuracy of the references, please use "Edit References by Auto-Analyser" (<https://www.f6publishing.com/Forms/main/ArticleReferenceTool.aspx>) to edit the references of the manuscript.

Reply: Thanks for your kindly reminder. We have checked and modified it.

(10) **Figures.** *Authors should place figure legends, figures, in separate pages at the end of the manuscript.*

Figures must be presented in the order that they appear in the main text of the manuscript (numbered as 1, 2, 3, etc.). All figures must have a detailed figure legend that provides a clear and comprehensive description of the information presented in the figure, so that the reader can understand without having to refer back to any other portion of the manuscript. Uniform presentation should be used for figures showing the same or similar contents; for example, "Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G: ...".

Abbreviations must be defined upon first appearance in the **Figure Legends**. Do not use non-standard abbreviations, unless they appear at least two times in the text preceding the first usage/definition.

Original figure documents. *In the meantime, authors should provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor, and upload it to the file destination of "Image File" in the F6Publishing system.*

Reply: Thanks for your kindly reminder. We have checked and modified it.

(11) **Tables.** *Authors should place Table Titles, Tables, and Table Notes in separate pages at the end of the manuscript.*

A brief, one-line title must be provided for each table. **(The title needs to be bolded).**

Reply: Thanks for your kindly reminder. We have added it.

(12) **Figure Color:** When using different color markings on the Figures, please avoid using red or green, including the arrow colors on the Figures.

Reply: Thanks for your kindly reminder. In our manuscript, We have checked and modified it.

(13) **Notes in figures and tables.** Data with statistical significance in a figure or table should be denoted using superscripted alphabetical lettering (don't include symbols, such as *, #, †, §, ‡, ¥, @...), such that ^aP < 0.05 and ^bP < 0.01. If there are other series of P values, the alphabetical subscripted denotation format is continued, such that ^cP < 0.05 vs control, ^dP <

0.01 *vs* control, $eP < 0.05$ *vs* group A, and $fP < 0.01$ *vs* group B. Data that are not statistically significant should not be denoted, *i.e.* $P > 0.05$ is not an allowed denotation.

Reply: Thanks for your kindly reminder. In our manuscript, We have checked and modified it.

(14) **Please add the “Author list”.** Author names (unabbreviated) should be given as first name, middle name initial (with no period) and family (sur)name, and typed in bold with the first letter of each capitalized. A hyphen should be included between the syllables of Chinese names. For example: Yi-Fan Chang, Jia-Jing Li, Tao Liu, Chong-Qing Wei, Li-Wei Ma, Vladimir N Nikolenko, Wei-Long Chang.

Reply: Greatly appreciate your suggestion. We have added it.

(15) **Please add the “Authors and institution(s)”:** Author names should be written out first (as first name, middle name initial (with no period) and family (sur)name; with a hyphen included between the syllables of Chinese names) and typed in bold, followed by a comma and the complete name of the affiliated institution, city, province/state, postcode and country typed in non-bold. Examples for authors name and institutions are:

Example 1:

Yi-Fan Chang, Tao Liu, Chong-Qing Wei, Wei-Long Chang, Department of Gastrointestinal Surgery, The First Affiliated Hospital of Zhengzhou University, Zhengzhou 450052, Henan Province, China

Jia-Jing Li, Department of Pathology, The First Affiliated Hospital of Zhengzhou University, Zhengzhou 450052, Henan Province, China

Example 2: In the case that one author represents two institutions, the institutions will be listed separately, as shown here:

Jin-Yu Pei, Bin Tan, Peng Liu, Guang-Hua Cao, Zu-Sen Wang, Lin-Lin Qu, Department of Hepatopancreatobiliary Surgery, The Affiliated Hospital of Qingdao University, Qingdao 266555, Shandong Province, China

Jin-Yu Pei, Peng Liu, Guang-Hua Cao, Medical College, Qingdao University, Qingdao 266071, Shandong Province, China

Reply: Greatly appreciate your suggestion. We have added it.

(16) **Abstract.** An informative, structured abstract of no more than 350 words should accompany each manuscript. Abbreviations should be avoided, but if used should be spelled out at first mention. The 5 sections of the structured abstract are:

BACKGROUND (no more than 100 words). This section should clearly describe the rationale for the study. It should end with a statement of the specific study hypothesis.

AIM (no more than 20 words). The purpose of the study should be stated clearly, with no or minimal background information, following the format of: “To investigate/study/determine...”.

METHODS (no more than 80 words). This section should describe the materials and methods used for all of the data presented in the proceeding Results section of the abstract. This information should include the following details, as applicable: basic study design; setting, specifying the study location (*e.g.*, primary or tertiary care setting, hospital, general community, *etc.*); number of participants and how they were selected; intervention, the method of administration and the duration; major statistical methods used.

RESULTS (no more than 120 words). This section should describe the key findings of the study, including absolute values and risk differences. *P* values should be presented where appropriate, and not for data that did not reach the threshold of statistical significance. Authors must provide relevant data to illustrate how the statistical values were obtained (*e.g.*, 6.92 ± 3.86 vs 3.61 ± 1.67 , $P < 0.001$).

CONCLUSION (no more than 30 words). This section should succinctly and cogently present the findings and implications that are within the scope of the data the authors have presented in the preceding Results section of the abstract. Authors should state only conclusions that are directly supported by the evidence presented and the implications of the findings presented. This section should be written in the present tense.

Reply: Greatly appreciate your suggestion. We have checked it.

(17) **Main text.** The main text contains (1) **INTRODUCTION**; (2) **MATERIALS AND METHODS**; (3) **RESULTS**; (4) **DISCUSSION**; and (5) **CONCLUSION**. These five first level subtitles should be all capitalized, bolded and underlined. For example: “**INTRODUCTION**” Under each first-level subtitle, there can be several second-level subtitles. For formatting, capitalize the first letter for the first word; the subtitles are all in bold and italicized. For example: “***Statistical analyses***”.

There can be several third-level subtitles under the second-level subtitles. For these, the first letter of the first word is capitalized, and the full subtitles are bolded followed by a colon immediate. For example: “**Mechanism of liver cancer: ...**”.

Reply: Greatly appreciate your suggestion. We have checked it.

(18) When listing the sub items included in a major item in the main text, priority should be given to using numerical numbers to connect them, for example: **(1); (2) ; and (3)**. The serial numbers are connected by semicolons, and the last one needs to be preceded by “and”. For example: (1) A; (2) B; (3) C; **and** (4) D.

Reply: Greatly appreciate your suggestion. We have checked it.

3 Recommendation: Conditional acceptance.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

(2) Company Editor-in-Chief:

I have reviewed the Peer-Review Report, full text of the manuscript, all of which have met the basic publishing requirements of the *World Journal of Clinical Cases*, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

作者返修手稿建议

尊敬的作者：为了提高作者手稿的学术质量和书写格式的规范性，缩短出版周期和节省时间，以及促进手稿顺利接受和在线发表，我们强烈建议作者采取以下措施以解决返修手稿过程中的重要问题。

第一，返修手稿。请作者邀请编辑部认可的论文润色公司 (<https://www.wjgnet.com/bpg/gerinfo/240>)，协助作者按照 *Checklist for Authors to Revise a Manuscript* 要求修改手稿中的每一项内容。另外，作者指南，见：<https://www.wjgnet.com/bpg/gerinfo/204>。

第二，同行评议。请论文润色公司，依据同行评议报告和科学编辑评论，协助作者对手稿的研究方法、数据分析和论点逻辑等进行进一步地审核，以确保手稿在学术上的正确性，协助作者解决审稿人提出的问题，并且逐条地回复审稿人的问题和建议。

第三，表格和图片。请论文润色公司协助作者解决表格和图片规范化的问题。表格应有表序和表题，并有足够具有自明性的信息，使读者不查阅手稿正文即可理解该表格的内容。表格内每一列均应有表头，表格内非通用缩写应在表格注解中说明，表格一律使用三线表格（不用竖线），并且在正文中该出现的地方注出。图应有图序、主题和图注，以使其容易被读者理解，所有的图应在正文中该出现的地方注出。同一个主题内容的彩色图、黑白图、和线条图，**应统一使用一个主题，并且每个子图的注解分别叙述。**如: Figure 1 Pathological changes of atrophic gastritis after treatment. A: ...; B: ...; C: ...; D: ...; E: ...; F: ...; G:

第四，参考文献。编辑部采用“顺序编码制”的著录方法，即根据文献在文中引用顺序以阿拉伯数字编号排序，并在文内引用处居中注明文献角码，如：[1-3]。每篇参考文献应包含 PMID 和 DOI 号码。参考文献测试系统，见：

<https://www.f6publishing.com/Forms/main/ArticleReferenceTool.aspx>。

第五，语言润色。邀请论文润色公司协助作者解决手稿中的拼写错误、语法错误、时态错误、单复数错误、标点错误和科学用词错误等等。

第六，学术查重。邀请论文润色公司协助作者对手稿进行学术查重。手稿一旦被编辑部判定为存在抄袭，将会被退稿。

第七，提交手稿。最终论文润色公司协助作者完成手稿修改，并确认符合期刊标准后，作者在 *Intelligent Manuscript Form Editor* 中提交手稿。

回复：非常感谢您的建议。我们已经按照上述要求检查了手稿并按要求进行修改了。