### General guideline for Peer Review process:

This journal’s peer review policy states that **NO** manuscript should be rejected only on the basis of *lack of Novelty*, provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

**PART 1: Review Comments**

<table>
<thead>
<tr>
<th>Reviewer’s comment</th>
<th>Author’s comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</th>
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<tbody>
<tr>
<td><strong>Compulsory</strong> REVISION comments</td>
<td>Sequential explanation of facts is important. While the author has mentioned pathogenesis, outcomes, epidemiological data etc., the way the facts/hypotheses are presented seems disjointed. Study population: Mention the other conditions the control group was suffering from. Does it impact the final outcome of the present study? Does the 1:2 case-control ratio have significance on assessment outcome? Figure 1: 5.7% controls were diabetic. These subjects cannot be included in control group. 79-80: Previous studies have shown that adults who were married or divorced were less likely to developed DM2, AND Lines 83-86; 88-90 etc. The above and many such other statements throughout the manuscript have to be explained in brief. Quoting references alone does not explain the purpose of inclusion of the statement in the present study. 277-278: There was no significant association between age and diabetes. There was also no significant association between marital status, religion and diabetes. AND 347-350: This study investigated the risk factors</td>
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</table>
associated with type 2 Diabetes Mellitus (DM2) among adults in the Hohoe Municipality. The study involved 70 cases and 140 controls. Risk factors identified to be significantly associated with DM were increasing age, marital status, blood glucose testing within 12 months, smoking and family history of DM2.

The results and discussion contradict reported data at many levels (an example is highlighted above). Similarly, the whole manuscript revolves around epidemiological/statistical representation of data. No scientific explanation regarding the reason for risk factor association with occurrence of diabetes is highlighted.
### Minor REVISION comments

48: In 2012 alone, diabetes and high blood glucose globally killed 1.5 and 2.2 million people respectively[6]. No clarity on what the author is stating.

47, 54-56: Repetition of facts. Complications and pathology can be explained in a more refined manner.

**Background characteristics of respondents:**
Paragraph is lengthy with many numbers which is confusing to read in sentence form. Tabular representation is more appropriate. References/Data on prevalence of Diabetes Type 2 in population less than 40 years of age should be included.

**Graphical representation of data along with tables will explain results better than theory alone.**

### Optional/General comments

Scientific language usage, grammar and punctuation corrections need to be done.

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**Reviewer Details:**

<table>
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<tr>
<th>Name</th>
<th>Anonymous</th>
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<tbody>
<tr>
<td>Department, University &amp; Country</td>
<td>Chairman and Managing Director, StemRx Bioscience Solutions Pvt. Ltd. R - 831, India</td>
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