PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (**http://bmjopen.bmj.com/site/about/resources/checklist.pdf**) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

ARTICLE DETAILS

TITLE (PROVISIONAL)	Ten-year Risk Prediction Models of Complications and Mortality of Diabetes Mellitus in Chinese Patients in Primary Care in Hong Kong: A study protocol
AUTHORS	WAN, Eric Yuk Fai; Yu, Esther Yee Tak; Chin, Weng Yee; Fung, Colman; Kwok, Ruby Lai Ping; Chao, David Vai Kiong; Chan, King Hong; Hui, Eric Ming-Tung; Tsui, Wendy Wing Sze; TAN, Kathryn; Fong, Daniel Yee Tak; Lam, Cindy

VERSION 1 – REVIEW

REVIEWER	Yoshifumi Saisho Keio University, Japan
REVIEW RETURNED	19-May-2018

GENERAL COMMENTS	This is a 10-year retrospective study on a population-based cohort of Chinese DM patients in primary care aiming to develop 10-year risk prediction models for total CVD and all-cause mortality. The study protocol is written clearly. The aims and methods are clear and limitations and strengths are properly discussed. There are few typos (e.g., Page 5 line 4 “stain”).

REVIEWER	Eitaro Kodani Nippon Medical School Tama-Nagayama Hospital, Japan
REVIEW RETURNED	26-May-2018

GENERAL COMMENTS	This protocol manuscript by Wan al. focused on the risk prediction for four major complications including coronary heart disease (CHD), heart failure, stroke, and end stage renal disease (ESRD), and all-cause mortality in Chinese patients with diabetes mellitus (DM). Authors demonstrated the protocol of this study in detail in the present manuscript. As authors described, there was discrepancy in event rates and their risk factor between Asians and other races in the western countries. Therefore, the concept of this study in Chinese who have different genetics, heals care policy, and culture. Overall manuscript seems written very well. Statistical methods deem to be appropriate and study quality is high. I am looking forward to seeing the results of this study. Authors may want to consider several minor issues as below. Major comments; 1) None Minor comments;

	1) Although this manuscript is actually protocol paper, it s difficult to know it from the title and introduction. Authors may want to state it more clearly. 2) In title, numeric number is inappropriate in the top of sentence. It should be “Ten-years Risk…” 3) Abbreviation of HDL-C should be described using full spelling at the first time of use. 4) Are you going calculate both AUC of ROC curve (in P9) and Harrell’s C statistic (P14) to evaluate predictive ability? Both values are very similar but, strictly speaking, different, as authors may know. 5) In Table, “15” may be miswritten in the unit of eGFR.

VERSION 1 – AUTHOR RESPONSE

Reviewer 1

R1(1):	This is a 10-year retrospective study on a population-based cohort of Chinese DM patients in primary care aiming to develop 10-year risk prediction models for total CVD and all-cause mortality. The study protocol is written clearly. The aims and methods are clear and limitations and strengths are properly discussed. There are few typos (e.g., Page 5 line 4 “stain”).
A:	*Thanks for your interest.* *Apologies for the typos. The typos have been amended in the revised manuscript.*

Reviewer 2

R2(1):	This protocol manuscript by Wan al. focused on the risk prediction for four major complications including coronary heart disease (CHD), heart failure, stroke, and end stage renal disease (ESRD), and all-cause mortality in Chinese patients with diabetes mellitus (DM). Authors demonstrated the protocol of this study in detail in the present manuscript. As authors described, there was discrepancy in event rates and their risk factor between Asians and other races in the western countries. Therefore, the concept of this study in Chinese who have different genetics, heals care policy, and culture. Overall manuscript seems written very well. Statistical methods deem to be appropriate and study quality is high. I am looking forward to seeing the results of this study. Authors may want to consider several minor issues as below.
A:	*Thanks for your interest.*

R2(2):	Although this manuscript is actually protocol paper, it s difficult to know it from the title and introduction. Authors may want to state it more clearly.
A:	*Sorry for the confusion. The title and introduction have been amended clearly in the revised manuscript.*

R2(3):	In title, numeric number is inappropriate in the top of sentence. It should be “Ten-years Risk…”

A:	*Thanks for your comments. The title have been amended in the revised manuscript.*

R2(4):	Abbreviation of HDL-C should be described using full spelling at the first time of use.
A:	*Thanks for your comments. The full name of HDL-C have been used in the revised manuscript.*

R2(5):	Are you going calculate both AUC of ROC curve (in P9) and Harrell's C statistic (P14) to evaluate predictive ability? Both values are very similar but, strictly speaking, different, as authors may know.
A:	*Thanks for your comments. Harrell's C statistic have been used in the revised manuscript.*

R2(6):	In Table, "15" may be miswritten in the unit of eGFR.
A:	*Apologies for the typos. The typos have been amended in the revised manuscript.*

VERSION 2 – REVIEW

REVIEWER	Eitaro Kodani Department of Internal Medicine and Cardiology, Nippon Medical School, Tama-Nagayama Hospital, Tokyo, Japan
REVIEW RETURNED	21-Jun-2018

GENERAL COMMENTS	This revised protocol manuscript by Wan al. focused on the risk prediction for four major complications including coronary heart disease (CHD), heart failure, stroke, and end stage renal disease (ESRD), and all-cause mortality in Chinese patients with diabetes mellitus (DM). Authors have revised the manuscript appropriately according to the reviewers' suggestions. Now, it appears to be better.