

Review Form 3

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_129827
Title of the Manuscript:	HEALTH-RELATED QUALITY OF LIFE AMONG ADULTS WITH TYPE 2 DIABETES ON TREATMENT WITH HERBAL AND CONVENTIONAL GLUCOSE-LOWERING AGENTS IN NAIROBI, KENYA.
Type of the Article	Original Research Article

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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 guidelines for the Peer Review process, reviewers are requested to visit this link:

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PART 1: Comments

	Reviewer's comment	Author's Feedback <i>(Please correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i>
Please write a few sentences regarding the importance of this manuscript for the scientific community. A minimum of 3-4 sentences may be required for this part.	The manuscript is because it gives more insights into health-related quality of life of patients with T2DM using both herbal and blood glucose lowering agents in Nairobi Kenya. Differences in the health-related quality of lives of both groups were highlighted and so, this study can contribute to general knowledge base on the subject matter.	
Is the title of the article suitable? (If not please suggest an alternative title)	No, the suggested title is "Health-Related Quality of Life Among Adults with Type 2 Diabetes on Treatment with Herbal and Pharmacological Blood Glucose-Lowering Agents In Nairobi, Kenya"	
Is the abstract of the article comprehensive? Do you suggest the addition (or deletion) of some points in this section? Please write your suggestions here.	The aim should be written as follows; The study determined and compared health-related quality of life in patients with type 2 diabetes on treatment with herbal and pharmacological Blood Glucose-Lowering Agents in Nairobi, Kenya. The keywords should be arranged alphabetically, title cases should be used consistently, they should be bold and conventional should be changed to Pharmacological Blood Glucose-Lowering Agents.	
Is the manuscript scientifically, correct? Please write here.	The manuscript is scientifically correct.	
Are the references sufficient and recent? If you have suggestions of additional references, please mention them in the review form.	The manuscript is not adequately referenced, there are some missing citations therein.	

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<p>Is the language/English quality of the article suitable for scholarly communications?</p>	<p>The quality of English is fair. Reported tenses must be used appropriately because the study has been completed. Sentences should not begin with prepositions and paragraphs should be re-structured. Some of your paragraphs are too short. An ideal paragraph should be between 5 and 8 lines.</p>	
<p><u>Optional/General</u> comments</p>	<p>INTRODUCTION Diabetes is a chronic disease affecting an estimated 537 million adults aged 20-79 years worldwide (Sources??). According to the international Diabetes Federation (IDF), this number is projected to increase to 783 million by 2045 (Sources??). The most rapid increase is expected to occur in low and middle- income <i>countries</i> where 80% of patients with diabetes live (Sun et al., 2022). The prevalence of diabetes in Kenya has been reported to be 4% (Sources??). Management of diabetes involves both lifestyle modifications and pharmacotherapy. In addition, self-management practices such as exercise, healthy diet and self-monitoring of blood glucose (SBMG) are recommended to improve diabetes treatment outcomes (Sources??). The goals of diabetes treatment are to achieve optimal glycemic control, relieve the signs and symptoms of hyperglycemia, prevent the occurrence and progression of microvascular and macrovascular complications and improve the patient's quality of life (Sources??). Diabetes and its treatment have the potential to affect the patient's quality of life in several ways. Diabetes-related complications may lead to decreased mobility, pain and inability to carry out their daily activities (Sources??). Other comorbid conditions may require additional treatment which further increases the treatment burden (Sources??). For example???, medical therapy, dialysis and renal transplant may be required to treat end-stage renal failure in patients with type 2 diabetes (Jing et al., 2018) (You can't start a new sentence with a preposition, you have to recast the sentence). Other factors that may worsen quality of life in patients with type 2 diabetes include the complexities of diabetes treatment regimens, cost of medications, and adverse effects of drugs(Sources??). The World Health Organization (WHO), (2011), defines health as "a state of complete physical, mental, and social well-being—not merely the absence of disease, or infirmity" . Therefore, there exists a gap on how this patient-reported outcome among patients with type 2 diabetes treated at the herbal clinics. In ??? this study, we estimated and compared the quality of life in patients treated for type 2 diabetes at Kenyatta National Hospital (KNH) and New Life Herbal Clinic (NLHC) in Nairobi City County, Kenya. Study design and setting A facility-based cross-sectional study was conducted at Kenyatta National Hospital (KNH) and New Life Herbal Clinic (NLHC), a private herbal clinic in Nairobi County, Kenya between March 2019 and December 2021 (Data collection began almost 6 years ago! Can some of the data still be reliable???) Data collection on HRQoL Patients who met the criteria and consented to the study were recruited during their clinic visits. The abbreviated World Health Organization Quality of Life (WHOQOL-BREF) year??? questionnaire was used to collect HRQoL data. The questionnaire has a total of 26 questions. Twenty-four questions (items) belong to 4 different domains (dimensions) of health namely; environmental (8 questions), physical (7 questions), psychological (6 questions) and social (3 questions). The remaining two questions assessed the patients' general QOL and health. One question was asked about the individual's overall perception of HRQoL while the other evaluated the individual's general perception of his or her health. Each question has 5 Likert-type response options with scores ranging 1-5. Higher scores represent higher QOL (Harper et al., 1998). Data on the sociodemographic characteristics, diabetes duration, complications and comorbidities as well as types of antidiabetic treatments were obtained through face to face interviews and from patients files and recorded with a general questionnaire. Statistical Analysis (USE REPORTED TENSES TO RE-WRITE THIS SECTION AND RECAST YOUR SENTENCES THAT START WITH PREPOSITIONS). NO INFORMATION ON ETHICAL CLEARANCE AT ALL, PLEASE PROVIDE FULL INFORMATION ON THIS FOR BOTH STUDY SITES. RESULTS</p>	

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	<p>A total of 80 patients were recruited at the KNH Endocrinology and Diabetes Outpatient Centre while 37 patients were enrolled at the herbal clinic. A greater proportion of the patients treated for type 2 diabetes at KNH were females (52, 65%) compared to those at the herbal clinic (13, 35.1%). (REFER TO YOUR STUDY POPULATION AS PARTICIPANTS PLEASE, THEY ARE NOT PATIENTS IN THIS STUDY).</p> <p>DETERMINANTS OF HRQoL The results of bivariable (This should be bivariate) and multivariable linear regression analysis are presented in Table 3</p> <p>DISCUSSION The study compared health-related quality of life among patients who were treated for type 2 diabetes in a conventional setting with those receiving care in a herbal clinic. In Japan (Lu et al., 2017), patients with type 2 diabetes on CAM were found...</p> <p>... Physical activity on prescription (PAP) was also reported to improve physical functioning among Swedish patients (Brorsson Lundqvist et al., 2024). Physical activity plays a critical role in the management of type 2 diabetes. Regular exercise is helpful in controlling weight, blood sugar levels, blood pressure as well as in reducing the incidence of cardiovascular diseases. Moderate exercise can improve the body's immunity and insulin resistance resulting in better glycemic control, reduced risk of diabetes-related complications, and improved QOL (Shah et al., 2021).</p> <p>... Similarly, the male participants had better scores on the environment domain; this may reflect better means of transportation, security and access to health information among them compared to the female participants..... Previous studies (cite some of them) have reported mixed findings regarding the relationship between alcohol consumption and HRQoL in T2DM patients. Moderate alcohol intake may confer cardiovascular benefits, potentially enhancing HRQoL; on the other hand, alcohol consumption increases the risk of comorbidities and may have negative economic consequences leading to poor HRQoL (Wonde et al., 2022).</p> <p>ETHICAL APPROVAL The KNH/UON Ethics and Research Committee granted ethical approval for this research (Approval number KNH/ERC/R/91). Participants were asked for voluntary consent to be recruited into the study. (THIS SHOULD APPEAR IN THE METHODOLOGY).</p>	
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PART 2:

	Reviewer's comment	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)
Are there ethical issues in this manuscript?	<i>(If yes. Kindly please write down the ethical issues here in details)</i>	

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