Review of: "Glycemic Control Is Associated With Lipid Profile and Atherogenic Index of Plasma in Type 2 Diabetes Mellitus"

Tomokazu Konishi[1]

1 Akita Prefectural University

Thank you for the useful information. We too are interested in lipid abnormalities, but in the future, we will also pay attention to sugar metabolism. It is true that the increase in sugar will lead to an increase in TG production in the body.

One thing I noticed is that the n numbers are very high, so the P values tend to be low. Therefore,

Variables Good (N = 164) Inadequate (N = 157) Poor (N = 244) P-value (ANOVA)

TC (mmol/L) 4.81 ± 1.26 4.59 ± 1.23 5.09 ± 1.22 < 0.001

The amount of TC, for example, does not differ much between Good and Poor; the P-value is an indicator of reproducibility, but not of the importance of the value.

Can these values be represented by, for example, a bihistogram? You can overlap the histograms of each of them. Perhaps, but the populations overlap considerably. In that case, it would be difficult to use these as indicators. This is also true for HbA1c, which seems to yield a clear difference.

Our observation is that somehow free glycerol could be used as an indicator of lipid abnormalities. This is simple to measure, if you like. https://doi.org/10.1371/journal.pone.0283855