

REVIEWER'S REPORT

Manuscript No.: JNHM -119

Title: Cardiometabolic Outcomes of the Comprehensive Diabetes Care (CDC) Programme Across 16 Clinics in Vidharbha: A Real-World Multi-Site Cohort Study.

Recommendation:

- Accept as it is**
- Accept after minor revision.....
- Accept after major revision
- Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality	✓			
Techn. Quality	✓			
Clarity	✓			
Significance	✓			

Reviewer Id: JPR-174

Reviewer's Comment for Publication.

This manuscript presents a comprehensive and well-executed real-world evaluation of the Comprehensive Diabetes Care (CDC) programme across 16 clinical sites in the Vidharbha region. The study addresses an important public health challenge and significantly expands the existing evidence base by providing the first large-scale multi-site assessment of this integrative diabetes management approach.

The manuscript demonstrates several notable strengths. The large sample size, inclusion of multiple clinic locations, and assessment of a broad range of cardiometabolic outcomes substantially enhance the clinical relevance and external validity of the findings. The authors have employed appropriate statistical methodologies, including mixed-effects regression modelling to account for clinic-level variability, thereby improving the robustness of the analysis. The presentation of inter-clinic heterogeneity is particularly valuable and represents a meaningful contribution to programme evaluation and quality improvement efforts.

The study is clearly structured, logically organized, and written in a concise and scientifically rigorous manner. The objectives are well defined, the methodology is adequately described, and the results are presented with clarity and transparency. The discussion appropriately interprets the findings within the context of existing literature while acknowledging important limitations inherent to retrospective observational designs.

The observed improvements in glycaemic control, blood pressure, anthropometric parameters, and lipid profiles provide compelling evidence regarding the potential benefits of the CDC programme in routine clinical practice. Furthermore, the identification of substantial inter-clinic variation offers important insights for future programme optimization and standardization.

Overall, the manuscript is original, methodologically sound, clinically relevant, and contributes meaningful real-world evidence to the field of integrative diabetes management. The conclusions are supported by the presented data, and the study offers valuable information for clinicians, researchers, and healthcare policymakers.

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I recommend acceptance of this manuscript for publication in its present form without any revisions.