


	JURNAL INTERNATIONAL BERPUTASI TERAKREDITASI Q2
JUDUL ARTIKEL	Quality of Life Differences in Pre- and Post-Educational Treatment in Type 1 Diabetes Mellitus During COVID-19
JURNAL	Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy, Dove Medical Press Ltd.
PENULIS	Nur Rochmah ; Muhammad Faizi ; Yuni Hisbiyah ; Ike Wahyu Triastuti ; Garindra Wicaksono ; Anang Endaryanto ; Soetjipto
No	Perihal
1	Bukti Submit
2	Proses Review
3	Komentar Reviewer Round1
4	Komentar Reviewer Round 2
5	Respon dari author
6	Bukti Accepted, Publish dan Payment

1. BUKTI SUBMIT



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Submission Details

Sub ID: 313575

Editorial Team Contact: [Ms Boon Lee](#)

Manuscript Title: Quality of Life Differences in Pre- and Post-Educational Treatment in Type 1 Diabetes Mellitus During COVID-19

Journal: Diabetes, Metabolic Syndrome and Obesity | [Aims and Scope](#)

Contact Person: Dr Rochmah

Submitted On: 30 Mar 2021

Status: PEY - XML CONVERSION PUMBED

Article type: Original Research

Number of Authors: 7

My Dovepress
Logged in as Dr Rochmah

Manuscript Status (11)

Author Resources


- [Manuscript Preparation](#)
- [Figures and tables](#)
- [Supplementary data](#)
- [Clinical trials registration](#)
- [Research ethics and consent](#)
- [Authorship](#)
- [Terms of Publication](#)

Surabaya, 7 Agustus 2023



Dr. NUR ROCHMAH dr., Sp.A(K)

Submission history

- 1** **Submission** 
 - 30 March 2021 **Submission created**
 - 30 March 2021 **Submission submitted + Editorial checks**
 - 31 March 2021 **Awaiting author/editor confirmation**
 - 6 April 2021 **Revised submission received**
 - 6 April 2021 **Editorial checks completed moved to Compliance checks**

EMAIL VIEWER



Sent on: 30 March 2021

From: From: "Ms Appleton" <melanieappleton@dovepress.com>

To: nur-r@fk.unair.ac.id

Subject: Manuscript submitted to Dove Medical Press

Body: Dear Mrs Rochmah,

Thank you for your recent submission to Neuropsychiatric Disease and Treatment, titled "Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19" which has been received.

You uploaded the following files with this submission:
313575-ms.doc
313575-table-qol-diff.docx
313575-cover-letter-qol.docx

CONFLICT OF INTEREST DISCLOSURE

Please now complete the disclosure form by clicking on the following link:
https://www.dovepress.com/icmje_coi.php?submission_id=313575&author_id=1466517&l=A9YDypACsLaPnI7OrubimGgK1466517

The purpose of this form is to provide the Editor-in-Chief of Neuropsychiatric Disease and Treatment with important information about your possible conflicts of interests. The composition of this form follows that of the International Committee of Medical Journal Editors (ICMJE) standard and further demonstrates our commitment to the highest ethical and professional standards.

The form is designed to be completed and stored electronically. Each author will receive an individual email like this and should submit a separate form. Each author is responsible for the accuracy and completeness of the submitted information.

The form is designed to be completed and stored electronically. Each author will receive an individual email like this and should submit a separate form. Each author is responsible for the accuracy and completeness of the submitted information.

What happens next:

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Your submission will be given an initial review to ensure its suitability for Neuropsychiatric Disease and Treatment. Once that has been completed, peer review will commence, and we will be in contact again when that has been completed.

If your paper is accepted for publication you will need to pay an article publishing charge of USD 1375 (plus VAT if applicable).

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At any time throughout the submission process you are welcome to contact the Editorial Team should you have any questions about your submission. The status of your submission can also be tracked through DoveCentral. You will automatically be notified of changes in the status of your submission.

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- Nothing in the submission is unlawful, libelous or would constitute a breach of contract or confidence or commitment to secrecy; and,
- I absolve Dove Medical Press Ltd from all legal liability arising from my submission; and,
- I have taken due care to ensure integrity of the submission and according to currently accepted scientific knowledge all statements in it purporting to be facts are true.

Some institutions have an open access fund available to their researchers, which can help to pay for the publication processing fee. We encourage you to contact your institution library to enquire if this is available to you.

Changes to authorship
=====

Dove does not permit the changing/adding/deleting of authors after submission of the paper. We support the GPP3 guidelines that indicate addition or removal of an author should only happen in rare cases, such as the work changing substantially in response to the reviewer or Editor's comments.

Many thanks for your submission.

Yours sincerely

Ms Appleton
Editorial Department
Dove Medical Press
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(ID: 313575)

EMAIL VIEWER



Sent on: 31 March 2021
From: From: "Ms Appleton" <melanieappleton@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Form for Disclosure of Potential Conflicts of Interest [ID 313575] Completed
Body: Dear Mrs Rochmah

Regarding your manuscript 'Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19'

I confirm we have received your completed Conflict of Interest disclosure.

If I can be of further assistance, please do not hesitate to contact me.

Kind regards
Ms Appleton

Editorial Department
Dove Medical Press
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[ID: 313575]

2. PROSES REVIEW

2

Peer Review

7 April 2021 **Peer review selection**

7 April 2021 **Peer review invitations sent**

9 April 2021 **First peer reviewer allocated**

13 April 2021 **First report returned**

21 April 2021 **Second or more peer reviewer reports returned**

3

Editorial decision - revisions

14 May 2021 **Report sent to the Editor-in-Chief**

16 May 2021 **Report: revise with changes**

19 May 2021 **Resubmission pending**

2 June 2021 **Resubmitted manuscript received**

6 June 2021 **Processing revised manuscript**

8 June 2021 **Sent to Editor-in-Chief for acceptance or rejection**

4 June 2021 **Query regarding revised manuscript**

EMAIL VIEWER



Sent on: 14 May 2021
From: From: "Sumedha Kasturi" <sumedhakasturi@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Your manuscript has been sent to the Editor-in-Chief [ID 313575]
Body: Dear Mrs Rochmah

Journal Name: Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy
Title: Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19
ID: 313575
Author: Mrs Rochmah

We are happy to advise that your manuscript and comments from the peer-reviewers have been delivered to our Editor-in-Chief to review and comment. We will be in touch shortly with the outcome.

Please note that the decision of the Editor-in-Chief whether to accept or reject any paper is full and final.

Please do not hesitate to contact us if you have any questions.

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Sincerely,

Sumedha Kasturi
Editorial Department
Dove Medical Press Ltd
Live Chat: http://www.dovepress.com/live_help.t

EMAIL VIEWER



Sent on: 18 May 2021
From: From: "Sumedha Kasturi" <sumedhakasturi@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Manuscript submitted to Dove Medical Press - Response Required
Body: Dear Mrs Rochmah ,

Thank you for your manuscript submission to Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy. On behalf of the Editor, I would like to inform you that your submitted manuscript 'Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19' (313575) has been peer-reviewed and may be considered for publication after the necessary revisions are completed to the Editors satisfaction.

IMPORTANT

We require you to confirm that you wish to proceed and intend to submit a revised manuscript within 21 days. You can do this by confirming your intention to revise by using the calendar supplied on your author dashboard; or you can reply to this email.

(https://www.dovepress.com/manuscript_revision.php?submission_id=313575&l=A9YDypACsLaPnI7OrubimGgK1466517).

Once you confirm your intention to revise, we will send a confirmation email which contains a link to submit your revised files.

If, after you have considered the reviewer comments, you decide that you require longer than 21 days to revise and resubmit, please let us know immediately.

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https://www.dovepress.com/manuscript_revision.php?pa=reviewer_comment&submission_id=313575&l=A9YDypACsLaPnI7OrubimGgK1466517

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ETHICAL CORRECTIONS:

- Please confirm in the revised manuscript that all participants and their parents or legal guardian provided informed consent, and that this study was conducted in accordance with the Declaration of Helsinki.
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- Table formatting: Please ensure both the tables 1 and 2 are reformatted to upright position while resubmitting.
- Please ensure copies of all figures/tables/supplementary material are provided with the revised manuscript, even if these are not altered during the revisions so we can ensure we have the most up to date file for each.

EDITORIAL CORRECTIONS:

- Your paper has been identified as requiring English language copy editing. Please address this in your revised manuscript to ensure the Editor-in-Chief sees the best possible version of your manuscript when they make their final decision.
- Table formatting: Please ensure both the tables 1 and 2 are reformatted to upright position while resubmitting.
- Please ensure copies of all figures/tables/supplementary material are provided with the revised manuscript, even if these are not altered during the revisions so we can ensure we have the most up to date file for each.

When submitting your revised manuscript, please also provide a separate response letter addressed to the Editor. Please address every comment made by the Reviewers and Editor, and all the requested Editorial and Ethical corrections in both the manuscript and response letter. This will ensure your revised manuscript proceeds through our system without delays. Any comments or corrections not addressed or responded to will result in your submission being placed on hold while we await the corrections to be made.

Kind Regards,

Sumedha Kasturi
On behalf of Professor Ming-Hui Zou
Editorial Department
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EMAIL VIEWER



Sent on: 19 May 2021
From: From: "Sumedha Kasturi" <sumedhakasturi@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Dove Medical Press – Confirmation of Revision Period
Body: Dear Mrs Rochmah

Titled: Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19
Submission ID: 313575

Thank you for confirming your intention to submit a revised manuscript for Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy. I have noted a due date of 08 Jun 2021 in our system. If you require further time, please let us know as soon as possible. We look forward to receiving your revised manuscript.

When submitting your revised manuscript, please include a point-by-point response letter. This letter must contain all comments made by the reviewers, the Editor and the editorial staff, and your responses to these comments. The response letter assists the Editor in their final decision.

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Please use the following link to submit your revised manuscript, response letter and any additional revised or requested files.

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Please use the following link to submit your revised manuscript, response letter and any additional revised or requested files.

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We would also like to invite you to submit a short video abstract, which will be published with your paper. This is an initiative that encourages videos to be presented by the author(s). The video should be of 1-3 minutes duration and give an overview of their paper, so readers can get an idea of the content and motivation behind the paper.

If you are able to prepare a video abstract for this paper please ensure this is completed and submitted at the same time as your revised manuscript, as we will be unable to accept a video abstract at a later stage in the process. In the meantime the guidelines and an example video abstract are available here: https://www.dovepress.com/author_guidelines.php?content_id=3195

Kind regards

Sumedha Kasturi
sumedhakasturi@dovepress.com
Dove Medical Press
[ID 313575]

EMAIL VIEWER



Sent on: 2 June 2021
From: From: "Sumedha Kasturi" <sumedhakasturi@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Your revised files have been successfully submitted [313575]
Body: Dear Mrs Rochmah ,

Thank you for submitting your revised manuscript and additional files to Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy. These have been uploaded successfully. We will begin processing the submission in the next few days, and will be in contact with an update once we have performed our Editorial Checks.

We have received the following files:

1. 01_Jun_2021_Revised_Quality_of_life_differences_in_pre-_and_post-educational_treatment_in_type_1_diabetes_mellitus_during_COVID-19_2.doc
2. 01_Jun_2021_English_Copy_Editing_Enago_QoL_difference.pdf
3. 01_Jun_2021_PedsQL_32_children.pdf
4. 01_Jun_2021_Sworn_Translator_PedsQL.pdf
5. 01_Jun_2021_Response_to_Reviewer_Dovepress.docx

If you have any queries, or if there is a problem with any of the uploaded files, please email the revised manuscript co-ordinator below and they can help get it corrected.

Regards,
Sumedha Kasturi
Revised Manuscript Co-ordinator
sumedhakasturi@dovepress.com
Dove Medical Press Ltd

3. KOMENTAR REVIEWER ROUND 1

Manuscript ID number:

313575

Title of paper:

Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19

Reviewer 1

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Excellent

2. Do the title and abstract cover the main aspects of the work?

Yes

3. If relevant are the results novel? Does the study provide an advance in the field?

Yes

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

Yes

6. If relevant, do all the results presented match the methods described?

Yes

7. If relevant, is the statistical analysis appropriate to the research question and study design?

Yes

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

Yes

9. How do you rate how clearly and appropriately the data are presented

Excellent

10. If relevant, did the authors, make the underlying data available to the readers?

Yes

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

Yes

Are images clear and free from unnecessary modification?

Yes

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

Yes

Evaluation

This manuscript is a cross-sectional study, the objective of which aims was to determine whether online education is effective in improving the quality of life of children with type 1 DM, during the COVID-19 pandemic.

I don't find major revisions. However, I suggest that it requires english editing

Reviewer 2

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes. abstract and title are clear and relevant

3. If relevant are the results novel? Does the study provide an advance in the field?

No. I don't think the methodology is robust enough to draw conclusions

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No. Went through ethics so I think this is fine. It wasn't 100% clear however that explicit individual participant consent was obtained or not. "the subjects were interviewed to collect data based on PedsQL" does this mean they were consented?

5. If relevant, are the methods clear and replicable?

No. I would like to have known more about the actual intervention e.g. a comprehensive list of topics covered, also it mentioned supplementary materials but again with limited detail- what was this? in what format - leaflets? videos? apps? Was the session interactive? was there a peer support element. was it 1:1 or all done together in a group session? How soon after and how long before was the QOL survey done? Would have been good to include some feedback on satisfaction with the session - content and tools used to deliver it

6. If relevant, do all the results presented match the methods described?

Yes. yes- although would have benefited some additional info on patient/parent satisfaction, and more around subdomains. Also given that the tool being used was translated, it would have been beneficial to go a pilot of the translated form for accuracy and usability before using it in the study. I think it has not previously been validated in Indonesian translation.

7. If relevant, is the statistical analysis appropriate to the research question and study design?

No. This would benefit feedback from a statistician used to doing analysis of questionnaire data, as I am not convinced that taking a mean score and then doing a paired t-test is necessarily the best approach. There is no description of whether the data is normally distributed etc. Also see above concerns re: validity of the translated tool

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

NA

9. How do you rate how clearly and appropriately the data are presented

Fair

10. If relevant, did the authors make the underlying data available to the readers?

Yes. Tables are presented, but limited detail around data distribution etc

11. Do the conclusions correlate to the results found?

No. They have shown a statistical difference in some parameters, but is a change from a mean score of 75.29 to 76.51 (or 75.66 to 76.80) really clinically meaningful ??? I'd be interested in some more discussion around this point. Also there is no control group, and given this is observational and at a time where there are rapidly changing home and environmental circumstances due to the pandemic; there is a significant risk of bias/ risk that any change was due to background factors and not the study intervention

12. Are the figures and tables clear and legible?

Yes

Are images clear and free from unnecessary modification?

Yes

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes. generally yes ok- but some small inconsistencies e.g. around use of page numbers in reference etc

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

No

Evaluation

1.abstract and title are clear and relevant

2. Went through ethics so I think this is fine. It wasn't 100% clear however that explicit individual participant consent was obtained or not. "the subjects were interviewed to collect data based on PedsQL" does this mean they were consented?

3.I would liked to have know more about the actual intervention e.g. a comprehensive list of topics covered, also it mentioned supplementary materials but again with limited detail- what was this? in what format - leaflets? videos? apps? Was the session interactive? was there a peer support element. was it 1;1 or all done together in a group session? How soon after and how long before was the QOL survey done? Would have been good to include some feedback on satisfaction with the session - content and tools used to deliver it

4.would have benefited some addition info on patient/parent satisfaction, and more around subdomains. Also given that the tool being used was translated, it would have been beneficial to go a pilot of the translated form for accuracy and usability before using it in the study. i think it has not previously been validated in Indonesian translation.

5.Would benefit feedback from statistician used to doing analysis of questionnaire data, as I am not convinced that taking a mean score and then doing a paired t-test is necessarily the best approach. There is no description of whether the data is normally distributed etc. Also see above concerns re: validity of the translated tool.

6.You have shown a statistical difference in some parameters, but is a change from a mean score of 75.29 to 76.51 (or 75.66 to 76.80) really clinically meaningful ??? I'd be interested in some more discussion around this point. Also there is no control group, and give this is observational and at a time where there are rapidly changing home and environmental circumstances due to the pandemic; there is a significant risk of bias/ risk that any change was due to background factors and not the study intervention.

Reviewer 3

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes. I suggest to add the word "pandemic" after COVID-19 in the title.

3. If relevant are the results novel? Does the study provide an advance in the field?

Yes

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

Yes

6. If relevant, do all the results presented match the methods described?

Yes

7. If relevant, is the statistical analysis appropriate to the research question and study design?

Yes

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

No. It is not clear how the patients were included in the study population? Are they all the patients followed at the authors' Diabetes Centre who meet the inclusion criteria?

9. How do you rate how clearly and appropriately the data are presented

Fair

10. If relevant, did the authors, make the underlying data available to the readers?

No. It should be useful if the authors included the English version of the questionnaire administered to patients and their parents as a supplementary file.

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

No. Tables, especially Table 1, should be widened to include more details.

Are images clear and free from unnecessary modification?

Yes

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

Yes

Evaluation

I read with great interest the paper. The authors describe the impact of online educational treatment among type 1 diabetes children and their parents during the COVID-19 pandemic. The study design is good and the paper could provide novelty to the current literature. However, some major revisions should be addressed before considering the paper eligible for publication.

Above all, a thorough revision of the English language is mandatory. Some parts are characterized by poor English that makes the text difficult to read.

Regarding the material and methods section, it is not clear how the patients were included in the study population? Are they all the patients followed at the authors' Diabetes Centre who meet the inclusion criteria?

The description of clinical features of the study population is poor. Data on diabetes duration, age at diagnosis, type of treatment, evaluation of glycemic control (e.g. last year mean value of HbA1c, CGM metrics) should be added both in the text and in Table 1.

Did the authors compare the results on the basis of differences in clinical or demographical characteristics (e.g. age classes, diabetes duration, socioeconomic status)? In my opinion, this aspect should be considered to make more interesting the results of the study.

It should be useful if the authors included the English version of the questionnaire administered to patients and their parents as a supplementary file.

MINOR REVISION

Abstract

COVID-19 is the acronym for Coronavirus 2019 disease. Please, re-write.

Introduction

The psychological impact of the COVID-19 pandemic on pediatric patients with chronic diseases, particularly type 1 diabetes, should be mentioned. Please see et consider the following paper: doi: 10.3389/fped.2020.00491.

Lines 47-48: I am afraid about the validity of this sentence. In Western countries, celiac disease is much more common than type 1 diabetes. Please, think and re-write.

Line 56: many studies have demonstrated that during the lockdown phase, patients with type 1 significantly improved their glycemic control (e.g doi: 10.3389/fendo.2020.595735, doi: 10.1136/bmjdr-2020-001664). Please discuss this aspect.

Line 67: it should be "it has been previously reported"

Material and methods

Lines 89, 91: the name of one of the authors (dr. Nur Rochmah) should not appear in the text. Please, replaced it with "a pediatric diabetes specialist"

Lines 101-102: "how many years they had had diabetes, at what age were they diagnosed, and hemoglobin A1c levels" should be "diabetes duration, age at diagnosis, and glycated hemoglobin levels"

Line 105: acronyms such as BMI and WHO should be specified when used for the first time in the text.

Finally, it is not clear according to which criteria patients were divided among three age classes (5-7 ys, 8-12 ys, 13-18 ys). It should be better to consider the following age classes: prepubertal age 5-9 ys, pubertal age 10-14 ys, and post-pubertal age 15-18 ys).

Discussion

Lines 189-192: it is quite exaggerated supposing epidemiological conclusions based on a such small sample. Please delete it. Conversely, the socio-economic aspect may be very interesting and this aspect should be widened.

Reviewer 4

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes

3. If relevant are the results novel? Does the study provide an advance in the field?

NA

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

No. the statistical methods are correct even if very simple, however the sample size calculation and the enrollment criteria of the 33 studied patients are missing (consecutive ?, random? other ???); how was the socio-economic level defined? how was Parents'educational background defined (Table 2)?

It should be better specified what the educational training consisted of.

6. If relevant, do all the results presented match the methods described?

No. the results are consistent with the objectives of the study, but the duration of the follow-up must be specified. However, among the parameters considered, the authors mention HbA1c, and it would be interesting to know if the values have changed in the follow-up.

7. If relevant, is the statistical analysis appropriate to the research question and study design?

No. the statistical methods are correct even if very simple, however the sample size calculation

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

No. comments and conclusions are clear although they could be more concisenono controls were studied

9. How do you rate how clearly and appropriately the data are presented

Fair. The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

10. If relevant, did the authors, make the underlying data available to the readers?

No. 1.In the Acknowledgments paragraph, patients and their caregivers should be thanked

2.They are completely missing:

-funding

-authorship

-Authorship contributions

-Compliance with Ethics Guidelines

-Data Availability

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

No. The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

Are images clear and free from unnecessary modification?

No

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

No

Evaluation

General comment

The paper is interesting and well written. The goals are clear

Major criticism

the statistical methods are correct even if very simple, however the sample size calculation and the enrollment criteria of the 33 studied patients are missing (consecutive ?, random? other ???); how was the socio-economic level defined? how was Parents'educational background defined (Table 2)?

It should be better specified what the educational training consisted of.

the results are consistent with the objectives of the study, but the duration of the follow-up must be specified. However, among the parameters considered, the authors mention HbA1c, and it would be interesting to know if the values have changed in the follow-up.

comments and conclusions are clear although they could be more concise

The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

Limitations are missing

Minor criticism

1.In the Acknowledgments paragraph, patients and their caregivers should be thanked

2.They are completely missing:

-funding

-authorship

-Authorship contributions

-Compliance with Ethics Guidelines

-Data Availability

3. KOMENTAR REVIEWER ROUND 2

ETHICAL CORRECTIONS:

- Please confirm in the revised manuscript that all participants and their parents or legal guardian provided informed consent, and that this study was conducted in accordance with the Declaration of Helsinki.

- If you have any queries regarding the ethic requirements, please view our Frequently Asked Questions:

https://www.dovepress.com/cr_data/ethics-faq-2019.pdf

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- Your paper has been identified as requiring English language copy editing. Please address this in your revised manuscript to ensure the Editor-in-Chief sees the best possible version of your manuscript when they make their final decision.

- Table formatting: Please ensure both the tables 1 and 2 are reformatted to upright position while resubmitting.

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TEEN REPORT (ages 13-18)

DIRECTIONS **copy**

Teens with diabetes sometimes have special problems. Please tell us **how much of a problem** each one has been for you during the **past ONE month**
permission

by circling: **0** if **Review** it is **never without** a problem

1 if it is **almost never** a problem

3 if it **use** is **often** a problem

4 if it is **almost always** a problem

There are no right **Do** or wrong **not** answers.

If you do not understand a question, please ask for help.

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In the past **ONE month**, how much of a **problem** has this been for you ...

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have stomachaches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

Review without

In the past **ONE month**, how much of a **problem** has this been for you ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots use	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My parents and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everythi g I need to do to care for my diabetes Do					

Whether you do these things **on your own or with the help of your parents**, please answer how hard these things were to do in the past **ONE month**.

TREATMENT II - (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to exercise or do sports	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has this been for you ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4
3. I worry about long-term complications from diabetes	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has this been for you ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0	1	2	3	4
3. It is hard for me to explain my illness to other people	0	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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PARENT REPORT for TEENS (ages 13-18)

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DIRECTIONS

Teens with diabetes sometimes have special problems. On the following page is a list of things that might be a problem for **your teen**. Please tell us **how much of a problem** each one has been for **your teen** during the **past ONE month** by circling:

Review without

0 if it is **never** a problem

1 if it is **almost never** a problem

2 if it is **sometimes** a problem

not

Do 4 if it is **almost always** a problem

There are no right or wrong answers.

If you do not understand a question,

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In the past **ONE month**, how much of a **problem** has your teen had with ...

DIABETES (problems with...)	Never	Almost Never	Sometimes	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having stomachaches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your teen had with ...

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TREATMENT - I (problems with...)	Never	Almost Never	Sometimes	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes treatment	0	1	2	3	4
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my teen to do everything he/she needs to do to care for his/her diabetes	0	1	2	3	4

Review without

Whether your teen does these things **independently or with your help**, please answer how difficult these things were to **Do** in the past **ONE month**. (Note: This section is **not** asking about your teen's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Sometimes	Often	Almost Always
1. It is hard for my teen to take blood glucose tests	0	1	2	3	4
2. It is hard for my teen to take insulin shots	0	1	2	3	4
3. It is hard for my teen to exercise or do sports	0	1	2	3	4
4. It is hard for my teen to track carbohydrates	0	1	2	3	4
5. It is hard for my teen to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my teen to snack when he/she goes "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your teen had with ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4
3. Worrying about long-term complications from diabetes	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your teen had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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CHILD REPORT (ages 8-12)

DIRECTIONS

Children with diabetes sometimes have special problems. Please tell us **how much of a problem** each one has been for you during the **past ONE month**

by circling:

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0 if it is **never** a problem

1 if it is **almost never** a problem

2 if it is **sometimes** a problem

Review without

3 if it is often a problem

4 if it is **almost always** a problem

use

There are no right or wrong answers.

Do not

If you do not understand a question, please ask for help.

PedsQL 3.2 - (8-12) Diabetes

04/09

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In the past **ONE month**, how much of a **problem** has this been for you ...

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have tummy aches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

Review without

In the past **ONE month**, how much of a **problem** has this been for you ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My parents and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everything I need to do to care for my diabetes					

Whether you do these things **on your own or with the help of your parents**, please answer how hard these things were to do in the past **ONE month**.

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to play or do sports	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has this been for you ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4
3. I worry about long-term complications from diabetes	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has this been for you ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0 permission	1	2	3	4
3. It is hard for me to explain my illness to other people	0	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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PARENT REPORT for CHILDREN (ages 8-12)

DIRECTIONS **copy permission**

Children with diabetes sometimes have special problems. On the following page is a list of things that might **Review** be a problem **without** for your child. Please tell us **how much of a problem** each one has been for your child during the **past ONE month** by circling:

0 if it is **never** a problem

1 if it **use** is **almost never** a problem

2 if it is **sometimes** a problem

not 3 if it is **often** a problem

4 if it is **almost always** a problem

There are no right **Do** or wrong answers.

If you do not understand a question, please ask for help.

In the past **ONE month**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having tummy aches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

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TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes treatment	0	1	2	3	4
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do everything he/she needs to do to care for his/her diabetes	0	1	2	3	4

Whether your child does these **Do** things **independently or with your help**, please answer how difficult these things were to do in the past **ONE month**. (Note: This section is **not** asking about your child's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my child to take blood glucose tests	0	1	2	3	4
2. It is hard for my child to take insulin shots	0	1	2	3	4
3. It is hard for my child to play or do sports	0	1	2	3	4
4. It is hard for my child to track carbohydrates	0	1	2	3	4
5. It is hard for my child to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my child to snack when he/she goes "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

WORRY (problems with...)	Never	Almost Never	Some- times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4
3. Worrying about long-term complications from diabetes	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some- times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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YOUNG CHILD REPORT (ages 5-7)

Instructions for interviewer: **copy permission**




I am going to ask you some questions about things that might be a problem for some children. I want to know how much of a problem any of these things might be for you.

Show the child the template and point **Review** to the responses **without** as you read.

If it is not at all a problem for you, point to the smiling face

If it is sometimes a problem for you, point to the middle face

*I will read each question. Point to the pictures to show me how much of a problem it is for you. Let's try a practice **not** first.*

	Not at all	Sometimes	A lot
Is it hard for you to snap your fingers			

Ask the child to demonstrate snapping his or her fingers to determine whether or not the question was answered correctly. Repeat the question if the child demonstrates a response that is different from his or her action.

Think about how you have been doing for the last few weeks. Please listen carefully to each sentence and tell me how much of a problem this is for you.

After reading the item, gesture to the template. If the child hesitates or does not seem to understand how to answer, read the response options while pointing at the faces.

ABOUT MY DIABETES (problems with...)	Not at all	Some-times	A lot
1. Do you feel hungry	0	2	4
2. Do you feel thirsty	0	2	4
3. Do you have to go to the bathroom a lot	0	2	4
4. Do you have tummy aches	0	2	4
5. Do you have headaches	0	2	4
6. Do you feel like you need to throw up	0	2	4
7. Do you go "low"	0	2	4
8. Do you go "high"	0	2	4
9. Do you feel tired	0	2	4
10. Do you get shaky	0	2	4
11. Do you get sweaty	0	2	4
12. Do you feel dizzy	0	2	4
13. Do you feel weak	0	2	4
14. Do you have trouble sleeping	0	2	4
15. Do you get cranky or grumpy	0	2	4

Review without

Remember, tell me how much of a problem this has been for you for the last few weeks.

ABOUT MY TREATMENT - I (problems with...)	Not at all	Some-times	A lot
1. Does it hurt to prick your finger	0	2	4
2. Does it hurt to get insulin shots	0	2	4
3. Are you embarrassed about your diabetes treatment	0	2	4
4. Do you and your parents argue about your diabetes not	0	2	
5. Is it hard for you to do everything you need to do to care for your diabetes	0	2	4

Do

Whether you do these things on your own or with the help of your parents,

please answer how hard these things were to do in the last few weeks.

ABOUT MY TREATMENT - II (problems with...)	Not at all	Some-times	A lot
1. Is it hard for you to take blood glucose tests	0	2	4
2. Is it hard for you to take insulin shots	0	2	4
3. Is it hard for you to play or do sports	0	2	4
4. Is it hard for you to keep track of carbohydrates	0	2	4
5. Is it hard for you to carry a fast-acting carbohydrate	0	2	4
6. Is it hard for you to snack when you go "low"	0	2	4

Think about how you have been doing for the past last few weeks. Please listen carefully to each sentence and tell me how much of a problem this is for you.

After reading the item, gesture to the template. If the child hesitates or does not seem to understand how to answer, read the response options while pointing at the faces.

WORRY (problems with...)	Not at all	Some-times	A lot
1. Do you worry about going "low"	0	2	4
2. Do you worry about going "high"	0	2	4

Remember, tell me how much of a problem this has been for you for the last few weeks.

COMMUNICATION (problems with...)	Not at all	Some-times	A lot
1. Is it hard for you to tell the doctors and nurses how you feel	0	2	4
2. Is it hard for you to ask the doctors and nurses questions	0	2	4
3. Is it hard for you to explain your illness to other people	0	2	4
4. Are you embarrassed about having diabetes	0	2	4

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How much of a problem is this for you?

Not at all



Sometimes ^{permission}



A lot



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PARENT REPORT for YOUNG CHILDREN (ages 5-7)

Children with diabetes sometimes have special problems. On the following

3 if it is **often** a problem
page is a list of things that might **Review** be a **without** problem for **your child**. Please
tell us

how much of a problem each one has been for **your child** during the
past ONE month by circling:

0 if it is **use n v r** a problem

1 if it is **almost never** a problem

Do4 if it is **almost always** a problem

There are no right or wrong answers.

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In the past **ONE month**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having tummy aches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

TREATMENT - I (problems with...)	N v r	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes					
USE					
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do every hing he/she needs to do to care for his/her diabetes	0	1	2	3	4

Do

Whether your child does these things **independently or with your help**, please answer how difficult these things were to do in the past **ONE month**. (Note: This section is **not** asking about your child's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my child to take blood glucose tests	0	1	2	3	4
2. It is hard for my child to take insulin shots	0	1	2	3	4
3. It is hard for my child to play or do sports	0	1	2	3	4
4. It is hard for my child to track carbohydrates	0	1	2	3	4
5. It is hard for my child to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my child to snack when he/she goes "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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Diabetes Module

Version 3.2

PARENT REPORT for TODDLERS (ages 2-4)

DIRECTIONS **copy permission**

Children with diabetes sometimes

Review have **without** special problems. On the following page is a list of things that might be a problem for **your child**. Please tell us **how much of a problem** each one has been for **your child** during the **past ONE month** by circling:

- 0** if it is **USE** n v r a problem
- 1** if it is **almost never** a problem
- 2** if it is **sometimes** a problem
- not 3** if it is **often** a problem
- 4** if it is **almost always** a problem

There are no right **Do** or wrong answers.

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In the past **ONE month**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having tummy aches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

TREATMENT - I (problems with...)	N v r	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain Review without	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes treatment	0	1	2	3	4
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do everything he/she needs to do to care for his/her diabetes					

Whether your child does these **Do** things **independently or with your help**, please answer how difficult these things were to do in the past **ONE month**. (Note: This section is **not** asking about your child's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard to give my child blood glucose tests	0	1	2	3	4
2. It is hard to give my child insulin shots	0	1	2	3	4
3. It is hard for my child to play or do sports	0	1	2	3	4
4. It is hard to track carbohydrates for my child	0	1	2	3	4
5. It is hard to carry a fast-acting carbohydrate for my child	0	1	2	3	4
6. It is hard to give my child snacks when he/she goes "low"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4

In the past **ONE month**, how much of a **problem** has your child had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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Diabetes Module

Version 3.2

ADULT REPORT

Acute Version

DIRECTIONS

much of a problem each one has been **copy** for you during the **past 7 days** by

Adults with diabetes sometimes have special problems. Please tell us **how**
circling: **0** if **Review** it is **never without** a problem **permission**

1 if it is **almost never** a problem

2 if it **use** is **sometimes** a problem

3 if it is **often** a problem

not 4 if it is **almost always** a problem

There are no right **Do** or wrong answers.

If you do not understand a question, please ask for help.

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In the past **7 days**, how much of a **problem** has this been for you ...

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have stomachaches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

Review without

In the past **7 days**, how much of a **problem** has this been for you ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots use	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My spouse, significant other, and/ r other family members and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everything I need to do to care for my diabetes	0	1	2	3	4

Please answer how hard these things were to do in the past **7 days**.

TREATMENT II - (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to exercise	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4
3. I worry about long-term complications from diabetes	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0	1	2	3	4
3. It is hard for me to explain my illness to other people	0 permission	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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Diabetes Module

Version 3.2

YOUNG ADULT REPORT (ages 18-25)

Young Adults with diabetes sometimes **copy** has **permission** special problems. Please tell us **how much of a problem** each one has been for you during the **past 7 days** by circling:

Acute Version

DIRECTIONS

0 if it is **never** a problem

1 if **Review** it is

almost **without** **never** a
problem

2 if it is **ometimes** a problem

3 if it is **often** a problem

use
4 if it is almost always a problem

not

There are no right or wrong answers.

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understand **Do**

a question, please ask for help.

PedsQL 3.2 - (Young Adult) Diabetes

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*In the past 7 days, how much of a **problem** has this been for you ...*

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have stomachaches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

Review without

*In the past 7 days, how much of a **problem** has this been for you ...*

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots use	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My parents and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everything I need to do to care for my diabetes Do					

Please answer how hard these things were to do in the past 7 days.

TREATMENT II - (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to exercise	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4
3. I worry about long-term complications from diabetes	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0	1	2	3	4
3. It is hard for me to explain my illness to other people	0	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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Diabetes Module

Version 3.2

PARENT REPORT for YOUNG ADULTS (ages 18-25)

DIRECTIONS

Young Adults with diabetes sometimes have special problems. On the following **copy permission**

page is a list of things that might be a problem for your child. Please tell us

how much of a problem each one has been for **your child** during the **past 7 days** by circling:

If you do not understand a question, please ask for help.

0 Review if it is **never without** a problem

1 use it is **almost never** a problem

2 if it is **sometimes** a problem

3 if it is **often** a problem

not 4 if it is **almost always** a problem

There are no right **Do**r wrong answers.

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In the past **7 days**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having stomachaches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your child had with ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. use treatment	0	1	2	3	4
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do everything he/she needs to do to care for his/her diabetes	0	1	2	3	4

Do

In the past **7 days**, how much of a **problem** has your child had with ...

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my child to take blood glucose tests	0	1	2	3	4
2. It is hard for my child to take insulin shots	0	1	2	3	4
3. It is hard for my child to exercise or do sports	0	1	2	3	4
4. It is hard for my child to track carbohydrates	0	1	2	3	4
5. It is hard for my child to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my child to snack when he/she goes "low"	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your child had with ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4
3. Worrying about long-term complications from diabetes	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your teen had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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Date: _____

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Diabetes Module

Version 3.2

TEEN REPORT (ages 13-18) Acute Version

DIRECTIONS

much of a problem each one has been **copy** for you during the **past 7 days** by
permission

sometimes

have special problems. Please tell us **how** Teens with diabetes

circling:

0 if **Review** it is **never without** a problem

1 if it is **almost never** a problem

3 if it **use** is **often** a problem

4 if it is **almost always** a problem

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PedsQL 3.2 - (13-18) Diabetes

04/09

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In the past **7 days**, how much of a **problem** has this been for you ...

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have stomachaches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

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Review without

In the past **7 days**, how much of a **problem** has this been for you ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My parents and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everything I need to do to care for my diabetes					

use

not

Do

Whether you do these things **on your own or with the help of your parents**, please answer how hard these things were to do in the past **7 days**.

TREATMENT II - (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to exercise or do sports	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4
3. I worry about long-term complications from diabetes	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0	1	2	3	4
3. It is hard for me to explain my illness to other people	0 permission	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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PARENT REPORT for TEENS (ages 13-18)
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Acute Version

DIRECTIONS

Teens with diabetes sometimes have special problems. On the following page is

without Review

a list of things that might be a problem for **you r teen**. Please tell us **how much of a problem** each one has been for **your teen** during the **past 7 days** by circling:

0 if it is never a problem
3 if it is often a problem

1 if it is **almost never** a problem

2 if it is **sometimes** a problem

not

Do

4 if it is **almost always** a problem

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In the past **7 days**, how much of a **problem** has your teen had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having stomachaches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your t en had with ...

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TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diab t s treatment	0	1	2	3	4
4. Arguing with me or my spouse abo diabetes care	0	1	2	3	4
5. It is hard for my teen to do everything he/she needs to do to care for his/her diabetes	0	1	2	3	4

Review without

Whether your teen does these **Do** things **independently or with your help**, please answer how difficult these things were to do in the past **7 days**. (Note: This section is **not** asking about your teen's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my teen to take blood glucose tests	0	1	2	3	4
2. It is hard for my teen to take insulin shots	0	1	2	3	4
3. It is hard for my teen to exercise or do sports	0	1	2	3	4
4. It is hard for my teen to track carbohydrates	0	1	2	3	4
5. It is hard for my teen to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my teen to snack when he/she goes "low"	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your teen had with ...

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4
3. Worrying about long-term complications from diabetes	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your teen had with ...

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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PedsQL™

Diabetes Module

Version 3.2

CHILD REPORT (ages 8-12)

DIRECTIONS

Children with diabetes sometimes have special problems. Please tell us **how much of a problem** each one has been for you during the **past 7 days** by

circling:

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0 if it is **never** a problem

1 if it is **almost never** a problem

2 if it is **sometimes** a problem

Review without

3 if it is often a problem

4 if it is **almost always** a problem

use

There are no right or wrong answers.

Do not

If you do not understand a question, please ask for help.

In the past **7 days**, how much of a **problem** has this been for you ...

ABOUT MY DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I feel hungry	0	1	2	3	4
2. I feel thirsty	0	1	2	3	4
3. I have to go to the bathroom too often	0	1	2	3	4
4. I have tummy aches	0	1	2	3	4
5. I have headaches	0	1	2	3	4
6. I feel like I need to throw up	0	1	2	3	4
7. I go "low"	0	1	2	3	4
8. I go "high"	0	1	2	3	4
9. I feel tired	0	1	2	3	4
10. I get shaky	0	1	2	3	4
11. I get sweaty	0	1	2	3	4
12. I feel dizzy	0	1	2	3	4
13. I feel weak	0	1	2	3	4
14. I have trouble sleeping	0	1	2	3	4
15. I get cranky or grumpy	0	1	2	3	4

Review without

In the past **7 days**, how much of a **problem** has this been for you ...

TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It hurts to get my finger pricked	0	1	2	3	4
2. It hurts to get insulin shots use	0	1	2	3	4
3. I am embarrassed by my diabetes treatment	0	1	2	3	4
4. My parents and I argue about my diabetes care	0	1	2	3	4
5. It is hard for me to do everythi g I need to do to care for my diabetes Do					

Whether you do these things **on your own or with the help of your parents**, please answer how hard these things were to do in the past **7 days**.

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to take blood glucose tests	0	1	2	3	4
2. It is hard for me to take insulin shots	0	1	2	3	4
3. It is hard for me to play or do sports	0	1	2	3	4
4. It is hard for me to keep track of carbohydrates	0	1	2	3	4
5. It is hard for me to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for me to snack when I go "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. I worry about going "low"	0	1	2	3	4
2. I worry about going "high"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has this been for you ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for me to tell the doctors and nurses how I feel	0	1	2	3	4
2. It is hard for me to ask the doctors and nurses questions	0	1	2	3	4
3. It is hard for me to explain my illness to other people	0	1	2	3	4
4. I am embarrassed about having diabetes	0	1	2	3	4

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PedsQL™

Diabetes Module

Version 3.2

PARENT REPORT for CHILDREN (ages 8-12)

Version

If you do not understand a question, please ask for help.

DIRECTIONS copy permission

Children with diabetes sometimes have special problems. On the following page is a list of things that might **Review** be a problem **without** for **your child**. Please tell us **how much of a problem** each one has been for **your child** during the **past 7 days** by circling:

- 0** if it is **never** a problem
- 1** if it **use** is **almost never** a problem
- 2** if it is **ometimes** a problem
- 3** if it is **often** a problem

not 4 if it is **almost always** a problem

There are no right **Do** r wrong answers.

In the past **7 days**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having tummy aches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **7 days**, how much of a **problem** has your child had with ...

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TREATMENT - I (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes treatment	0	1	2	3	4
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do everything he/she needs to do to care for his/her diabetes	0	1	2	3	4

Whether your child does these **Do** things **independently or with your help**, please answer how difficult these things were to do in the past **7 days**. (Note: This section is **not** asking about your child's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my child to take blood glucose tests	0	1	2	3	4
2. It is hard for my child to take insulin shots	0	1	2	3	4
3. It is hard for my child to play or do sports	0	1	2	3	4
4. It is hard for my child to track carbohydrates	0	1	2	3	4
5. It is hard for my child to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my child to snack when he/she goes "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has your child had with ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has your child had with ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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PedsQL™

Diabetes Module

Version 3.2

YOUNG CHILD REPORT (ages 5-7)

Instructions for interviewer:

I am going to ask you some questions about things that might be a problem for some children. I want to know how much of a problem any of these things might be for you.

Acute Version **permission**




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Show the child the template and point **Review** to the responses **without** as you read.

If it is not at all a problem for you, point to the smiling face

If it is sometimes a problem for you, point to the middle face

*I will read each question. Point to the pictures to show me how much of a problem it is for you. Let's try a practice one **not** first.*

	Not at all	Sometimes	A lot
Is it hard for you to snap your fingers			

Ask the child to demonstrate snapping his or her fingers to determine whether or not the question was answered correctly. Repeat the question if the child demonstrates a response that is different from his or her action.

PedsQL 3.2 (5-7) Diabetes
04/09

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Think about how you have been doing for the past 7 days. Please listen carefully to each sentence and tell me how much of a problem this is for you.

After reading the item, gesture to the template. If the child hesitates or does not seem to understand how to answer, read the response options while pointing at the faces.

ABOUT MY DIABETES (problems with...)	Not at all	Some-times	A lot
1. Do you feel hungry	0	2	4
2. Do you feel thirsty	0	2	4
3. Do you have to go to the bathroom a lot	0	2	4
4. Do you have tummy aches	0	2	4
5. Do you have headaches	0	2	4
6. Do you feel like you need to throw up	0	2	4
7. Do you go "low"	0	2	4
8. Do you go "high"	0	2	4
9. Do you feel tired	0	2	4
10. Do you get shaky	0	2	4
11. Do you get sweaty	0	2	4
12. Do you feel dizzy	0	2	4
13. Do you feel weak	0	2	4
14. Do you have trouble sleeping	0	2	4
15. Do you get cranky or grumpy	0	2	4

Review without

Remember, tell me how much of a problem this has been for you for the past 7 days.

ABOUT MY TREATMENT - I (problems with...)	Not at all	Some-times	A lot
1. Does it hurt to prick your finger	0	2	4
2. Does it hurt to get insulin shots	0	2	4
3. Are you embarrassed about your diabetes treatment	0	2	4
4. Do you and your parents argue about your diabetes not	0	2	
5. Is it hard for you to do everything you need to do to care for your diabetes	0	2	4

Do

Whether you do these things on your own or with the help of your parents,

please answer how hard these things were to do in the past 7 days.

ABOUT MY TREATMENT - II (problems with...)	Not at all	Some-times	A lot
1. Is it hard for you to take blood glucose tests	0	2	4
2. Is it hard for you to take insulin shots	0	2	4
3. Is it hard for you to play or do sports	0	2	4
4. Is it hard for you to keep track of carbohydrates	0	2	4
5. Is it hard for you to carry a fast-acting carbohydrate	0	2	4
6. Is it hard for you to snack when you go "low"	0	2	4

Think about how you have been doing for the past 7 days. Please listen carefully to each sentence and tell me how much of a problem this is for you.

After reading the item, gesture to the template. If the child hesitates or does not seem to understand how to answer, read the response options while pointing at the faces.

WORRY (problems with...)	Not at all	Some-times	A lot
1. Do you worry about going "low"	0	2	4
2. Do you worry about going "high"	0	2	4

Remember, tell me how much of a problem this has been for you for the past 7 days.

COMMUNICATION (problems with...)	Not at all	Some-times	A lot
1. Is it hard for you to tell the doctors and nurses how you feel	0	2	4
2. Is it hard for you to ask the doctors and nurses questions	0	2	4
3. Is it hard for you to explain your illness to other people	0	2	4
4. Are you embarrassed about having diabetes	0	2	4

Review without

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Do

How much of a problem is this for you?

Not at all



Sometimes ^{permission}



A lot



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Date: _____

PedsQLTM

Diabetes Module

Version 3.2

PARENT REPORT for YOUNG CHILDREN (ages 5-7) Acute Version

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DIRECTIONS

Review without

Children with diabetes sometimes have special problems. On the following page is a list of things that might be a problem for **your child**. Please tell us **how much of a problem** each one has been for **your child** during the **past 7 days** by circling:

0 if it is **use n v r** a problem

1 if it is **almost never** a problem

3 if it is **often** a problem

2 not if it is **sometimes** a problem

Do 4 if it is **almost always** a problem There are no right or wrong answers.

If you do not understand a question, please ask for help.

PedsQL 3.2 - Parent (5-7) Diabetes 04/09

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In the past **7 days**, how much of a **problem** has your child had with ...

DIABETES (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Feeling hungry	0	1	2	3	4
2. Feeling thirsty	0	1	2	3	4
3. Having to go to the bathroom too often	0	1	2	3	4
4. Having tummy aches	0	1	2	3	4
5. Having headaches	0	1	2	3	4
6. Feeling like he/she needs to throw up	0	1	2	3	4
7. Going "low"	0	1	2	3	4
8. Going "high"	0	1	2	3	4
9. Feeling tired	0	1	2	3	4
10. Getting shaky	0	1	2	3	4
11. Getting sweaty	0	1	2	3	4
12. Feeling dizzy	0	1	2	3	4
13. Feeling weak	0	1	2	3	4
14. Having trouble sleeping	0	1	2	3	4
15. Getting cranky or grumpy	0	1	2	3	4

In the past **7 days**, how much of a **problem** has our child had with ...

TREATMENT - I (problems with...)	N v r	Almost Never	Some-times	Often	Almost Always
1. Finger pricks causing him/her pain	0	1	2	3	4
2. Insulin shots causing him/her pain	0	1	2	3	4
3. Getting embarrassed about his/her diabetes					
4. Arguing with me or my spouse about diabetes care	0	1	2	3	4
5. It is hard for my child to do every hing he/she needs to do to care for his/her diabetes	0	1	2	3	4

Do

Whether your child does these things **independently or with your help**, please answer how difficult these things were to do in the past **7 days**. (Note: This section is **not** asking about your child's independence in these areas, just how hard they were to do).

TREATMENT - II (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. It is hard for my child to take blood glucose tests	0	1	2	3	4
2. It is hard for my child to take insulin shots	0	1	2	3	4
3. It is hard for my child to play or do sports	0	1	2	3	4
4. It is hard for my child to track carbohydrates	0	1	2	3	4
5. It is hard for my child to carry a fast-acting carbohydrate	0	1	2	3	4
6. It is hard for my child to snack when he/she goes "low"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has your child had with ...*

WORRY (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Worrying about going "low"	0	1	2	3	4
2. Worrying about going "high"	0	1	2	3	4

*In the past 7 days, how much of a **problem** has your child had with ...*

COMMUNICATION (problems with...)	Never	Almost Never	Some-times	Often	Almost Always
1. Telling the doctors and nurses how he/she feels	0	1	2	3	4
2. Asking the doctors or nurses questions	0	1	2	3	4
3. Explaining his/her illness to other people	0	1	2	3	4
4. Getting embarrassed about having diabetes	0	1	2	3	4

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PedsQL 3.2 (usia 5-7, 8-12, 13-18)

Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada Anda...

TERKAIT DIABETES SAYA (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Saya merasa lapar	0	1	2	3	4
2. Saya merasa haus	0	1	2	3	4
3. Saya harus ke kamar mandi terlalu sering	0	1	2	3	4
4. Saya mengalami sakit perut	0	1	2	3	4
5. Saya mengalami sakit kepala	0	1	2	3	4
6. Saya merasa ingin muntah	0	1	2	3	4
7. Saya merasa "gula darah rendah"	0	1	2	3	4
8. Saya merasa "gula darah tinggi"	0	1	2	3	4
9. Saya merasa lelah	0	1	2	3	4
10. Saya merasa gemeteran	0	1	2	3	4
11. Saya merasa berkeringat	0	1	2	3	4
12. Saya merasa pusing	0	1	2	3	4
13. Saya merasa lemah	0	1	2	3	4
14. Saya kesulitan untuk tidur	0	1	2	3	4
15. Saya merasa tegang atau mudah marah	0	1	2	3	4

Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada Anda...

PENGobatan - I (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Saya merasa sakit saat jari disuntik	0	1	2	3	4
2. Saya merasa sakit saat suntik insulin	0	1	2	3	4
3. Saya malu dengan pengobatan diabetes saya	0	1	2	3	4
4. Saya dan orang tua bertengkar tentang pengobatan diabetes saya	0	1	2	3	4
5. Sulit untuk melakukan segala hal yang saya butuhkan untuk menangani diabetes saya	0	1	2	3	4

Baik Anda melakukan hal berikut sendiri maupun dengan bantuan orang tua, jawab seberapa sulit hal-hal berikut dalam SATU bulan terakhir

PENGobatan - II (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Saya kesulitan untuk mengambil darah untuk tes glukosa	0	1	2	3	4
2. Saya kesulitan menggunakan suntikan insulin	0	1	2	3	4
3. Saya kesulitan untuk berolah raga	0	1	2	3	4
4. Saya kesulitan memantau karbohidrat	0	1	2	3	4
5. Saya kesulitan membawa karbohidrat aksi cepat	0	1	2	3	4
6. Saya kesulitan makan makanan ringan saat merasa "gula darah rendah"					



"Saya, **Mochamad Hikmat Gumilar**, penerjemah bersertifikat dan bersumpah berdasarkan Keputusan Gubernur DKI Jakarta Nomor 1765/2006, menyatakan bahwa saya fasih dalam bahasa Indonesia dan bahasa Inggris dan kompeten untuk menerjemahkan di antara kedua bahasa tersebut. Dengan ini saya nyatakan bahwa Terjemahan Bahasa Indonesia dari dokumen ini adalah benar dan akurat sejauh kemampuan dan keyakinan saya yang terbaik dari versi aslinya dalam bahasa Inggris. Jalan Gunung Indah V, Cirendeuh Residence Blok C No. C3A, Ciputat Timur, Tangerang Selatan, Banten 15419, Indonesia. Telepon +62811174361, penerjemah@penerjemah-id.com, 23 Desember 2020: Periksa keaslian terjemahan dengan mengirimkan barcode/dokumen ke alamat email di atas jika Anda meragukan bahwa terjemahan bukan dari penerjemah-id.com".



Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada Anda...

KEKHAWATIRAN (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Saya khawatir merasa "gula darah rendah"	0	1	2	3	4
2. Saya khawatir merasa "gula darah tinggi"	0	1	2	3	4
3. Saya khawatir akan komplikasi jangka panjang dari diabetes	0	1	2	3	4

Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada Anda...

KOMUNIKASI (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Saya kesulitan memberi tahu perasaan saya kepada dokter atau suster	0	1	2	3	4
2. Saya kesulitan untuk bertanya kepada dokter atau suster	0	1	2	3	4
3. Saya kesulitan menjelaskan penyakit saya kepada orang lain	0	1	2	3	4
4. Saya malu memiliki diabetes	0	1	2	3	4

PedsQL 3.2 (Laporan Orang Tua)

PedsQL 2

Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada anak Anda...

Diabetes (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Merasa lapar	0	1	2	3	4
2. Merasa haus	0	1	2	3	4
3. Harus ke kamar mandi terlalu sering	0	1	2	3	4
4. Mengalami sakit perut	0	1	2	3	4
5. Mengalami sakit kepala	0	1	2	3	4
6. Merasa ingin muntah	0	1	2	3	4
7. Merasa "gula darah rendah"	0	1	2	3	4
8. Merasa "gula darah tinggi"	0	1	2	3	4
9. Merasa lelah	0	1	2	3	4
10. Merasa gemetaran	0	1	2	3	4
11. Merasa berkeringat	0	1	2	3	4
12. Merasa pusing	0	1	2	3	4
13. Merasa lemah	0	1	2	3	4
14. Kesulitan untuk tidur	0	1	2	3	4
15. Merasa tegang atau mudah marah	0	1	2	3	4



Saya, **Mochamad Hikmat Gumilar**, penerjemah bersertifikat dan bersumpah berdasarkan Keputusan Gubernur DKI Jakarta Nomor 1765/2006, menyatakan bahwa saya fasih dalam bahasa Indonesia dan bahasa Inggris dan kompeten untuk menerjemahkan di antara kedua bahasa tersebut. Dengan ini saya nyatakan bahwa Terjemahan Bahasa Indonesia dari dokumen ini adalah benar dan akurat sejauh kemampuan dan keyakinan saya yang terbaik dari versi aslinya dalam bahasa Inggris. Jalan Gunung Indah V, Cirendeu Residence Blok C No. C3A, Ciputat Timur, Tangerang Selatan, Banten 15419, Indonesia. Telepon +62811174361, penerjemah@penerjemah-id.com, 23 Desember 2020. Periksa keaslian terjemahan dengan mengirimkan barcode/dokumen ke alamat email di atas jika Anda meragukan bahwa terjemahan bukan dari penerjemah-id.com.

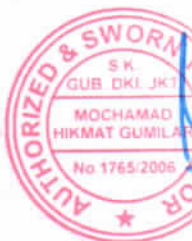


Dalam SATU bulan terakhir, seberapa sering kesulitan berikut terjadi pada Anda...

PENGobatan - I (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Jari disuntik membuatnya sakit	0	1	2	3	4
2. Suntik insulin membuatnya sakit	0	1	2	3	4
3. Merasa malu dengan pengobatan diabetesnya	0	1	2	3	4
4. Bertengkar dengan saya atau pasangan tentang pengobatan diabetesnya	0	1	2	3	4
5. Sulit bagi anak saya untuk melakukan segala hal yang dibutuhkan untuk menangani diabetesnya	0	1	2	3	4

Baik anak Anda melakukan hal berikut sendiri atau dengan bantuan Anda, jawab seberapa sulit hal-hal berikut dalam SATU bulan terakhir (Catatan: bagian ini tidak menanyakan tentang kemandirian anak Anda dalam hal tersebut, hanya tentang seberapa sulit mereka melakukan hal tersebut)

PENGobatan - II (masalah ketika...)	Tidak Pernah	Hampir Tidak Pernah	Kadang-kadang	Sering	Hampir Selalu
1. Anak saya kesulitan untuk mengambil darah untuk tes glukosa	0	1	2	3	4
2. Anak saya kesulitan menggunakan suntikan insulin	0	1	2	3	4
3. Anak saya kesulitan untuk berolah raga	0	1	2	3	4
4. Anak saya kesulitan memantau karbohidrat	0	1	2	3	4
5. Anak saya kesulitan membawa karbohidrat aksi cepat	0	1	2	3	4
6. Anak saya kesulitan makan makanan ringan saat merasa "gula darah rendah"	0	1	2	3	4



"Saya, **Mochamad Hikmat Gumilar**, penerjemah bersertifikat dan bersumpah berdasarkan Keputusan Gubernur DKI Jakarta Nomor 1765/2006, menyatakan bahwa saya fasih dalam bahasa Indonesia dan bahasa Inggris dan kompeten untuk menerjemahkan di antara kedua bahasa tersebut. Dengan ini saya nyatakan bahwa Terjemahan Bahasa Indonesia dari dokumen ini adalah benar dan akurat sejauh kemampuan dan keyakinan saya yang terbaik dari versi aslinya dalam bahasa Inggris. Jalan Gunung Indah V, Cirendeu Residence Blok C No. C3A, Ciputat Timur, Tangerang Selatan, Banten 15419, Indonesia. Telepon +62811174361, penerjemah@penerjemah-id.com. 23 Desember 2020. Periksa keaslian terjemahan dengan mengirimkan barcode/dokumen ke alamat email di atas jika Anda meragukan bahwa terjemahan bukan dari penerjemah-id.com".





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Crimson Interactive Inc. provides English language editing, transcription, and translation services to individuals and corporate customers worldwide.

4. RESPON DARI AUTHOR

Manuscript ID number:

313575

Title of paper:

Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19

Reviewer 1

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Excellent

2. Do the title and abstract cover the main aspects of the work?

Yes

3. If relevant are the results novel? Does the study provide an advance in the field?

Yes

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

Yes

6. If relevant, do all the results presented match the methods described?

Yes

7. If relevant, is the statistical analysis appropriate to the research question and study design?

Yes

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

Yes

9. How do you rate how clearly and appropriately the data are presented

Excellent

10. If relevant, did the authors, make the underlying data available to the readers?

Yes

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

Yes

Are images clear and free from unnecessary modification?

Yes

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

Yes

Evaluation

This manuscript is a cross-sectional study, the objective of which aims was to determine whether online education is effective in improving the quality of life of children with type 1 DM, during the COVID-19 pandemic. I don't find major revisions. However, I suggest that it requires english editing.

Author response:

Thank you. We have already used the English copy editing by Enago. Therefore, I also attach the proof or certificate of English language copy editing service from Enago.

Reviewer 2

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes. abstract and title are clear and relevant

3. If relevant are the results novel? Does the study provide an advance in the field?

No. I don't think the methodology is robust enough to draw conclusions

Author response:

Thank you. A study by Dudley et al. 2014 (doi: 10.2147/JMDH.S52681) stated that the way the health care team works together and implements technology and online education dramatically affects the client's success. This study involved participants completing an initial semi-structured interview. Another study from Algahtani et al. 2021 (doi: 10.3390/ijerph18030847) stated that community-based interventions are needed to mitigate the pandemic's negative effects and enhance the health and QoL of the general population. The online survey was the most feasible way to access the target population in light of the social-distance protocols implemented during the COVID-19 pandemic as mentioned on page 8, lines 194-200. So that, our study involved children and adolescents, as well as their parents, diagnosed with T1DM according to the International Society for Pediatric and Adolescent Diabetes guidelines. The patients were registered at the Pediatric Endocrinology Outpatient Clinic of Dr. Soetomo Hospital, Surabaya, Indonesia. The inclusion criteria for this study were age (5–18 years), diagnosed with T1DM, registered at the Pediatric Endocrinology Outpatient Clinic of Dr. Soetomo Hospital, treatment status (already started treatment), and hospital visits (visited the hospital with parents). The sample was randomly obtained after we share the information in a mobile application. Those who willing to join our interactive session were our sample population. For further explanation, please see page 3-4, lines 78-103 of the revised manuscript.

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animalsubjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No. Went through ethics so I think this is fine. It wasn't 100% clear however that explicit individual participant consnet was obtained or not. "the subjects were interviewed to collect data based on PedsQL" does this mean they ewre consented?

Author response:

Thank you. Yes, we have obtained informed consent from participants before the interview. We have added the explanation of consent, please see page 4-5, lines 106-107 of the revised manuscript.

If relevant, are the methods clear and replicable?

No. I would liked to have know more about the actual intervention e.g. a comprehensive list of topics covered, also it mentioned supplementary materials but again with limited detail- what was this? in what format - leaflets? videos? apps? Was the session interactive? was there a peer support element. was it 1;1 or all done together in a group session? How soon after and how long before was the QOL survey done? Would have been good to include some feedback on satisfaction with the session - content and tools used to deliver it

Author response:

Thank you. We have added the explanation as your suggestion, please see page 4, lines 90-103 (Community treatment) on the material and methods section.

5. If relevant, do all the results presented match the methods described?

Yes. yes- although would have benefited some addition info on patient/parent satisfaction, and more around subdomains. Also given that the tool being used was translated, it would have been beneficial to go a pilot of the translated form for accuracy and usability before using it in the study. i think it has not previously been validated in Indonesian translation.

Author response:

Thank you for the suggestion. We have added the feedback from participants, please see page 4, lines 101-103 of the revised manuscript. For the translated tool, a credible sworn translator has translated the PedsQL. We have added the explanation, please see page 6, lines 131-133. Also, we have tested the validity of translated PedsQL for accuracy and usability using SPSS with the supervision of a statistician from our university, please see page 6, lines 143-146 of the revised manuscript.

6. If relevant, is the statistical analysis appropriate to the research question and study design?

No. This would benefit feedback from statistician used to doing analysis of questionnaire data, as I am not convinced that taking a mean score and then doing a paired t-test is necessarily the best approach. There is no description of whether the data is normally distributed etc. Also see above concerns re: validity fo the translated tool

Author response:

Thank you. We have consulted our data with a statistician from our university. Also, based on the statistic journal from Kim K. T., 2015, Pre- and Post- study groups under comparison dependent on each other can use the paired t-test. Our data were normally distributed. We have already added the explanation, please see page 6, lines 152-155 of the revised manuscript.

7. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

NA

8. How do you rate how clearly and appropriately the data are presented

Fair

9. If relevant, did the authors, make the underlying data available to the readers?

Yes. Tables are presented, but limited detail around data distribution etc

10. Do the conclusions correlate to the results found?

No. They have shown a statistical difference in some parameters, but is a change form a mean score of 75.29 to 76.51 (or 75.66 to 76.80) really clinically meaningful ??? I'd be interested in some more discussion around this point. Also there is no control group, and give this is observational and at a time where there are rapidly changing home and environmental circumstances due to the pandemic; there is a significant risk of bias/ risk that any change was due to background factors and not the study intervention

Author response:

Thank you. Yes, it is clinically meaningful. Although there was no control group, it still clinically meaningful because there was a change in mean before and after educational intervention. The patients and their parents feel satisfied with this intervention and their QoL statistically and clinically had a significant improvement after the intervention. We have added some more discussion as your suggestion, please see page 8, lines 183-200 of the revised manuscript.

11. Are the figures and tables clear and legible?

Yes

Are images clear and free from unnecessary modification?

Yes

12. I have serious concerns about the validity of this manuscript

No

13. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes. generally yes ok- but some small inconsistencies e.g. around use of page numbers in reference etc

14. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

15. Do you think the manuscript requires English editing to correct the grammar or flow?

No

Evaluation

1. abstract and title are clear and relevant

Author response:

Thank you.

2. Went through ethics so I think this is fine. It wasn't 100% clear however that explicit individual participant consent was obtained or not. "the subjects were interviewed to collect data based on PedsQL" does this mean they were consented?

Author response:

Thank you. Yes, we have obtained informed consent from participants before the interview. We have added the explanation of consent, please see page 4-5, lines 106-107 of the revised manuscript.

3. I would like to have know more about the actual intervention e.g. a comprehensive list of topics covered, also it mentioned supplementary materials but again with limited detail- what was this? in what format - leaflets? videos? apps? Was the session interactive? was there a peer support element. was it 1;1 or all done together in a group session? How soon after and how long before was the QOL survey done? Would have been good to include some feedback on satisfaction with the session content and tools used to deliver it

Author response:

Thank you. We have added the explanation as your suggestion, please see page 4, lines 90-103 (Community treatment) on the material and methods section of the revised manuscript.

4. would have benefited some addition info on patient/parent satisfaction, and more around subdomains. Also given that the tool being used was translated, it would have been beneficial to go a pilot of the translated form for accuracy and usability before using it in the study. i think it has not previously been validated in Indonesian translation.

Author response:

Thank you for the suggestion. We have added the feedback from participants, please see page 4, lines 101-103 of the revised manuscript. For the translated tool, a credible sworn translator has translated the PedsQL. We have added the explanation, please see page 6, lines 131-133. Also, we have tested the validity of translated PedsQL for accuracy and usability using SPSS with the supervision of a statistician from our university, please see page 6, lines 143-146 of the revised manuscript.

5. Would benefit feedback from statistician used to doing analysis of questionnaire data, as I am not convinced that taking a mean score and then doing a paired t-test is necessarily the best approach. There is no description of whether the data is normally distributed etc. Also see above concerns re: validity of the translated tool.

Author response:

Thank you. We have consulted our data with a statistician from our university. Also, based on the statistic journal from Kim K. T., 2015, Pre- and Post- study groups under comparison dependent on each other can use the paired t-test. Our data were normally distributed. We have already added the explanation, please see page 6, lines 152-155 of the revised manuscript.

6. You have shown a statistical difference in some parameters, but is a change from a mean score of 75.29 to 76.51 (or 75.66 to 76.80) really clinically meaningful ??? I'd be interested in some more discussion around this point. Also there is no control group, and give this is

observational and at a time where there are rapidly changing home and environmental circumstances due to the pandemic; there is a significant risk of bias/ risk that any change was due to background factors and not the study intervention.

Author response:

Thank you. Yes, it is clinically meaningful. Although there was no control group, it still clinically meaningful because there was a change in mean before and after educational intervention. The patients and their parents feel satisfied with this intervention and their QoL statistically and clinically had a significant improvement after the intervention. We have added some more discussion as your suggestion, please see page 8, lines 183-200 of the revised manuscript.

Reviewer 3

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes. I suggest to add the word "pandemic" after COVID-19 in the title.

3. If relevant are the results novel? Does the study provide an advance in the field?

Yes

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animal subjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

Yes

6. If relevant, do all the results presented match the methods described?

Yes

7. If relevant, is the statistical analysis appropriate to the research question and study design?

Yes

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

Author response:

Thank you. We have no control groups in this study design, but we have included the inclusion criteria as mentioned in page 4, lines 82-87 of the revised manuscript.

No. It is not clear how the patients were included in the study population? Are they all the patients followed at the authors' Diabetes Centre who meet the inclusion criteria?

Author response:

Thank you. The subjects that included in this study were registered patients in Endocrine Outpatient Clinic of dr Soetomo Hospital Surabaya who meet the inclusion criteria and willing to join this interactive session after we share the information in mobile application group on phone. Yes, they all the patients followed at the author's Diabetes Centre who meet the inclusion criteria.

9. How do you rate how clearly and appropriately the data are presented

Fair

10. If relevant, did the authors, make the underlying data available to the readers?

No. It should be useful if the authors included the English version of the questionnaire administered to patients and their parents as a supplementary file.

Author response:

Thank you for the suggestion. We have included the English version of the questionnaire administered to patients and their parents.

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

No. Tables, especially Table 1, should be widened to include more details.

Author response:

Thank you. It is already revised as your suggestion.

Are images clear and free from unnecessary modification?

Yes

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

Yes

Evaluation

I read with great interest the paper. The authors describe the impact of online educational treatment among type 1 diabetes children and their parents during the COVID-19 pandemic. The study design is good and the paper could provide novelty to the current literature. However, some major revisions should be addressed before considering the paper eligible for publication.

Above all, a thorough revision of the English language is mandatory. Some parts are characterized by poor English that makes the text difficult to read.

Author response:

Thank you. We have already used the English copy editing by Enago. Therefore, I also attach the proof or certificate of English language copy editing service from Enago.

Regarding the material and methods section, it is not clear how the patients were included in the study population? Are they all the patients followed at the authors' Diabetes Centre who meet the inclusion criteria?

Author response:

Thank you. The subjects that included in this study were registered patients in Endocrine Outpatient Clinic of dr Soetomo Hospital Surabaya who meet the inclusion criteria and willing to join this interactive session after we share the information in mobile application group on phone. Yes, they all the patients followed at the author's Diabetes Centre who meet the inclusion criteria. Please see page 3-4, lines 79-87 of the revised manuscript.

The description of clinical features of the study population is poor. Data on diabetes duration, age at diagnosis, type of treatment, evaluation of glycemic control (e.g. last year mean value of HbA1c, CGM metrics) should be added both in the text and in Table 1.

Author response:

Thank you. We have added the data as your suggestions. Please see table 1 on page 16, lines 390-391 of the revised manuscript.

Did the authors compare the results on the basis of differences in clinical or demographical characteristics (e.g. age classes, diabetes duration, socioeconomic status)? In my opinion, this aspect should be considered to make more interesting the results of the study.

Author response:

Thank you. It is already revised as your suggestions. Please see page 7, lines 160-166 of the revised manuscript.

It should be useful if the authors included the English version of the questionnaire administered to patients and their parents as a supplementary file.

Author response:

Thank you. We have included the English version of the questionnaire administered to patients and their parents.

MINOR REVISION

Abstract

COVID-19 is the acronym for Coronavirus 2019 disease. Please, re-write.

Author response:

Thank you. We have revised as your suggestion. Please see page 1-2, lines 23-37 of the revised manuscript.

Introduction

The psychological impact of the COVID-19 pandemic on pediatric patients with chronic diseases, particularly type 1 diabetes, should be mentioned. Please see et consider the following paper: doi: 10.3389/fped.2020.00491.

Author response:

Thank you. It is already revised ass your suggestion. Please see page 2, lines 44-47 of the revised manuscript.

Lines 47-48: I am afraid about the validity of this sentence. In Western countries, celiac disease is much more common than type 1 diabetes. Please, think and re-write.

Author response:

Thank you. Yes, we agree that celiac disease is much more common in Western countries than type 1 diabetes, but in the Asian population, based on Kaur et al., 2018, T1D more common than celiac disease.

Line 56: many studies have demonstrated that during the lockdown phase, patients with type 1 significantly improved their glycemic control (e.g doi: 10.3389/fendo.2020.595735, doi: 10.1136/bmjdr-2020-001664). Please discuss this aspect. Line 67: it should be "it has been previously reported"

Author response:

Thank you. We have added the discussion, please see page 8-9, lines 208-210 of the revised manuscript.

Material and methods

Lines 89, 91: the name of one of the authors (dr. Nur Rochmah) should not appear in the text. Please, replaced it with "a pediatric diabetes specialist"

Author response:

Thank you. It is already revised as your suggestion. Please see page 4, lines 95-98 of the revised manuscript.

Lines 101-102: "how many years they had had diabetes, at what age were they diagnosed, and hemoglobin A1c levels" should be "diabetes duration, age at diagnosis, and glycated hemoglobin levels"

Author response:

Thank you. It is already revised as your suggestion. Please see page 5, lines 112.

Line 105: acronyms such as BMI and WHO should be specified when used for the first time in the text.

Author response:

Thank you. It is already revised as your suggestion. Please see page 5, lines 115-116 of the revised manuscript.

Finally, it is not clear according to which criteria patients were divided among three age classes (5-7 ys, 8-12 ys, 13-18 ys). It should be better to consider the following age classes: prepubertal age 5-9 ys, pubertal age 10-14 ys, and post-pubertal age 15-18 ys).

Author response:

Thank you. But, we divided among three age classes (5-7 ys, 8-12 ys, 13-18 ys) was based on the PedsQL 3.2 diabetes module that we used.

Discussion

Lines 189-192: it is quite exaggerated supposing epidemiological conclusions based on a such small sample. Please delete it. Conversely, the socio-economic aspect may be very interesting and this aspect should be widened.

Author response:

Thank you. It is already revised as your suggestion. Please see page 9-10, lines 234-238 of the revised manuscript.

Reviewer 4

Evaluations (peer review comments for the author)

1. In general, how do you rate the degree to which the paper is easy to follow and its logical flow?

Fair

2. Do the title and abstract cover the main aspects of the work?

Yes

3. If relevant are the results novel? Does the study provide an advance in the field?

NA

4. Did the study gain ethical approval appropriate to the country in which the research was performed if human or animalsubjects, human cell lines or human tissues were involved and is it stated in the manuscript?

Yes

Does the paper raise any ethical concerns?

No

5. If relevant, are the methods clear and replicable?

No. the statistical methods are correct even if very simple, however the sample size calculation and the enrollment criteria of the 33 studied patients are missing (consecutive ?, random? other ???); how was the socio-economic level defined? how was Parents'educational background defined (Table 2)?

Author response:

Thank you. The sample size calculation and the enrollment criteria of the 33 studied patients are random sampling. The explanation of socioeconomic level and parents educational background have already added, please see page 5, lines 121-128 of the revised manuscript.

It should be better specified what the educational training consisted of.

Author response:

Thank you. We have added the explanation as your suggestion. Please see page 4, lines 89-103 of the revised manuscript.

6. If relevant, do all the results presented match the methods described?

No. the results are consistent with the objectives of the study, but the duration of the follow-up must be specified. However, among the parameters considered, the authors mention HbA1c, and it would be interesting to know if the values have changed in the follow-up.

Author response:

Thank you. The duration of follow up has been mentioned. Please see page 4, lines 100-101 on community treatment section. Unfortunately, the HbA1c data were not followed up.

7. If relevant, is the statistical analysis appropriate to the research question and study design?

No. the statistical methods are correct even if very simple, however the sample size calculation

Author response:

Thank you. For the statistical method, we already discussed with a statistician from our university and based on statistic journal as mentioned on page 6, lines 153-155 of the revised manuscript.

8. If relevant, is the selection of the controls appropriate for the study design. Have attempts been made to address potential bias through analytic methods, eg., sensitivity analysis

No. comments and conclusions are clear although they could be more conciseno controls were studied

Author response:

Thank you. It is already revised as your suggestion. Please see page 10, lines 250-254 of the revised manuscript.

9. How do you rate how clearly and appropriately the data are presented

Fair. The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

Author response:

Thank you. It is already revised as your suggestion. Please see table 1 on page 16, lines 390-391 of the revised manuscript.

10. If relevant, did the authors, make the underlying data available to the readers?

No. 1. In the Acknowledgments paragraph, patients and their caregivers should be thanked 2. They are completely missing:

-funding

-authorship

-Authorship contributions

-Compliance with Ethics Guidelines

-Data Availability

Author response:

Thank you. We have added the funding, authorship contributions, compliance with Ethics Guideline, and the data availability in the revised manuscript. Please see page 10-11. Lines 256-282 of the revised manuscript.

11. Do the conclusions correlate to the results found?

Yes

12. Are the figures and tables clear and legible?

No. The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

Author response:

Thank you. It is already revised as your suggestion. Please see table 1 on page 16, lines 390-391 of the revised manuscript.

Are images clear and free from unnecessary modification?

No

13. I have serious concerns about the validity of this manuscript

No

14. Does the paper use appropriate references in the correct style to promote understanding of the content?

Yes

15. If relevant, do any of the authors competing interests raise concerns about the validity of the study i.e. have the authors' competing interests created a bias in the reporting of the results and conclusions?.

No

16. Do you think the manuscript requires English editing to correct the grammar or flow?

No

Evaluation

General comment

The paper is interesting and well written. The goals are clear Major criticism

the statistical methods are correct even if very simple, however the sample size calculation and the enrollment criteria of the 33 studied patients are missing (consecutive ?, random? other ???); how was the socio-economic level defined? how was Parents' educational background defined (Table 2)?

It should be better specified what the educational training consisted of. the results are consistent with the objectives of the study, but the duration of the follow-up must be specified. However, among the parameters considered, the authors mention HbA1c, and it would be interesting to know if the values have changed in the follow-up. comments and conclusions are clear although they could be more concise

The tables must be integrated with further data: Tab: add the BMI data to the nutritional status

Limitations are missing Minor criticism

1. In the Acknowledgments paragraph, patients and their caregivers should be thanked

2. They are completely missing:

-funding

-authorship

-Authorship contributions

-Compliance with Ethics Guidelines -Data

Availability

Author response:

Thank you. The sample size calculation and the enrollment criteria of the 33 studied patients are random sampling.

The explanation of socioeconomic level and parents educational background have already added, please see page 5, lines 121-128 of the revised manuscript.

Thank you. We have added the explanation as your suggestion. Please see page 4, lines 89-103 of the revised manuscript.

Thank you. It is already revised as your suggestion. Please see table 1 on page 16, lines 390-391 of the revised manuscript.

Thank you. We have added the BMI data. Please see table 1 on page 16, lines 390-391 of the revised manuscript.

Thank you, we have added the limitations, please see page 10, lines 239-243 of the revised manuscript.

Thank you. We have added the funding, authorship contributions, compliance with Ethics Guideline, and the data availability in the revised manuscript. Please see page 10-11. Lines 256-282 of the revised manuscript.

6. BUKTI ACCEPTED, PUBLISH DAN PAYMENT

EMAIL VIEWER X

Sent on: 10 June 2021

From: From: "Mrs Vivienne Gee" <viviennegee@dovepress.com>

To: nur-r@fk.unair.ac.id

Subject: Dove Medical Press: Submission accepted for publication

Body: Dear Mrs Rochmah ,

I am pleased to inform you that the submission, "Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19", has been accepted for publication in "Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy". The article publishing charge is now payable before the paper can be progressed any further and an invoice is accessible here: https://www.dovepress.com/invoice.php?i_key=WufPNF8GOjVFJeI4QZdBD7Bl51726 (If you require any amendments to your invoice please reply to this email. Please note invoices cannot be amended once a payment has been made)

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Yours sincerely

Mrs Vivienne Gee
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Yours sincerely

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Sent on: 28 June 2022
From: From: "Dove Medical Press" <adrianbell@dovepress.com>
To: nur-r@fk.unair.ac.id
Subject: Dove Medical Press update on your published paper
Body: Dear Dr Rochmah

Re: Your paper published in Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy

I just wanted to let you know that your paper, "Quality of Life Differences in Pre- and Post-Educational Treatment in Type 1 Diabetes Mellitus During COVID-19", has been well received in the year since it went online.

Total views: 3990

URL: https://www.dovepress.com/articles.php?article_id=66356

Weeks Since Published: 52

Best regards

Adrian Bell

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Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy - Your publication schedule [ID 313575]

ML Ms Lee 16 June 2021 04:13
Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy - Your publication schedule [ID 313575]
To: nur rochmah

Dear Mrs Rochmah

Re: Your paper "Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19"

Your paper will now be prepared for typesetting. I expect to be sending you an email to check your first author proof within the next 1-2 weeks.

Kind regards

Ms Lee
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[ID 313575]

E nur rochmah 16 June 2021 09:40
Fwd: Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy - Your publication schedule [ID 313575]
To: Farahdina Al Faro, bening kusuma, Fairuz Haniyah Ramadhani

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VG Mrs Vivienne Gee 14 June 2021 03.54
Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy - Your receipt [ID 313575]
To: Mrs Rochmah

Dear Mrs Rochmah

Thank you, we have received payment of invoice #51726 for your paper "Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19" (receipt available here: https://www.dovepress.com/invoice.php?i_key=WufPNF8GOjVFJel4QZdBD7Bj51726).

Your paper is in the queue for one of our Editorial Coordinators to prepare and check all files to send to our typesetter for processing.

Best regards

Mrs Vivienne Gee
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[ID 313575]

NR nur rochmah 14 June 2021 05.50
FW: Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy - Your receipt [ID 313575]
To: Farahdina Al Faro, Bening Sekre Endo Fkm, Fairuz Haniyah Ramadhani

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Sumedha Kasturi
 Dove Medical Press – Confirmation of Revision Period
 To: Mrs Rochmah

19 May 2021 11.04

Dear Mrs Rochmah

Titled: Quality of life differences in pre- and post-educational treatment in type 1 diabetes mellitus during COVID-19
Submission ID: 313575

Thank you for confirming your intention to submit a revised manuscript for Diabetes, Metabolic Syndrome and Obesity: Targets and Therapy. I have noted a due date of 08 Jun 2021 in our system. If you require further time, please let us know as soon as possible. We look forward to receiving your revised manuscript.

When submitting your revised manuscript, please include a point-by-point response letter. This letter must contain all comments made by the reviewers, the Editor and the editorial staff, and your responses to these comments. The response letter assists the Editor in their final decision.

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Please use the following link to submit your revised manuscript, response letter and any additional revised or requested files.
https://www.dovepress.com/upload_files_new.php?submission_id=313575&l=A9YDypACsLaPnI7OrubimGgK1466517

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If you are able to prepare a video abstract for this paper please ensure this is completed and submitted at the same time as your revised manuscript, as we will be unable to accept a video abstract at a later stage in the process. In the meantime the guidelines and an example video abstract are available here:
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Kind regards

Sumedha Kasturi
sumedhakasturi@dovepress.com
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 [ID 313575]



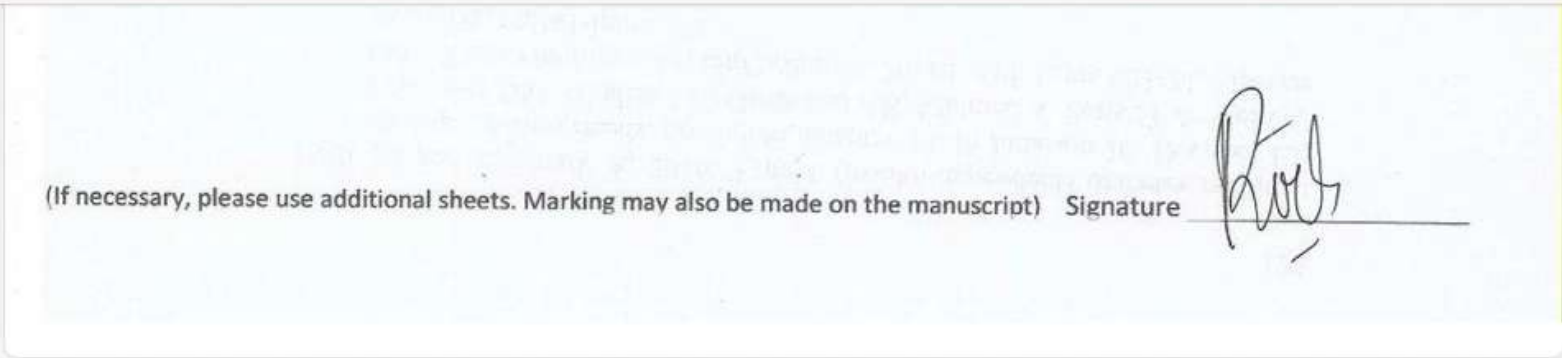
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A Administrator Journal 24 March 2020 12.21
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 To: Ema

Respected Sir,
 Thank you very much for reviewing the article.
 The Editorial Board appreciates your support for the journal.
 We hope that you would continue to extend the same in future.

Regards
 Editorial Board

23.03.2020, 10:07, "Drnur Rochmah" <drnurrochmahspa@yahoo.com>:

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