

## Guidelines for Commentaries

Thank you for agreeing to write a commentary for *Diabetes*. Commentaries in *Diabetes* are written following an invitation from either the journal's Editor in Chief or an Associate Editor to a senior investigator in the relevant field. The purpose of a commentary in *Diabetes* is to provide additional insights into original data contained within a corresponding article published in the same issue of the journal. There are several instances in which the journal's editors will request such a commentary:

- **A controversial area of investigation.** The editors may invite a commentary because the article in question touches on a particularly controversial subject. Here, it is likely helpful for readers not expert in this area to be provided some perspective on the controversy by an independent expert(s).
- **Multiple articles on a related topic.** On other occasions a commentary is invited because more than one article on a related topic is published in the same issue of *Diabetes*. This provides an opportunity for an independent expert to compare the different contributions and collectively address the topic of how they advance the field. If the multiple articles are in disagreement, it is also helpful to discuss the likely explanations for this variance and how these differences might be resolved in the future.
- **A major advance.** Another potential purpose of a commentary is to highlight a particularly important contribution, one that has the potential to change the field substantially.
- **Important but understudied areas of investigation.** The editors might choose to invite a commentary on an article that emanates from one of the understudied but important areas of investigation related to diabetes. This provides an opportunity to the invited author to highlight the importance of the area in general, as well as provide an independent analysis of the work.

Commentaries should be written in a form that contains five components that flow freely from one section of prose to the next: 1) an introduction to the problem, 2) background on the topic, 3) a brief overview of the article, 4) an evaluation of the article's strengths and weaknesses, and 5) notation of the importance of the work and discussion of future directions for the field. While no particular word count should be ascribed to the above sections, we do request you balance these components, with the following thoughts.

Since the readership of *Diabetes* is so diverse in terms of individual expertise, a commentary should begin with an introduction that explains in readily accessible (i.e., jargon-free) terms, an address of the question, "what is important about this area of investigation?" Examples of this would include prose that notes the morbidity and mortality associated with the topic for the article in question, highlights the desire to meet a clinical need, or admits a lack in understanding of a particular process or pathway. From there, the commentary should move towards provision of a limited but informative background section. This should then be followed by a description relaying the outcomes of the original data study, with particular highlight towards the question that has been addressed by the study. The section on strengths and weaknesses provides the commentary author

the potential to review their opinion of the work. Finally, and perhaps most importantly, commentaries should close by notation of the work's contribution to the field and, based on that, how the topic in question will and should advance.

Commentaries should be short (maximum 1,000 words), written in readily accessible form to scientifically literate readers who do not work in this field, since these are likely to be the majority of readers. Commentaries may contain up to one figure and/or one table, not of original data, but simply to illustrate concepts (e.g., a flow a diagram or cartoon, a graphic describing a cellular process, etc.). There should be no more than 20 references. The invited author may choose to co-author a commentary with one or more colleagues, but it should be emphasized that the expectation is that a commentary will be written by senior investigators in the field (i.e., not research fellows, students, etc.). By selecting senior authors in the field, we request that the commentary, as well as its references, be balanced and not targeted predominately to highlight the accomplishments of the author of the commentary. Finally, it should be noted that commentaries are subject to peer review by the editors of *Diabetes* as well as other experts in the field, selected at their discretion. With this, all commentaries are therefore subject to editing, and it must be understood that publication of such works, even with initial editorial invitation, is not guaranteed.