Thank you for your thoughtful review of our manuscript. Below, we address the concerns and issues raised by the reviewers and editors.

We purposefully chose to use estimates as calculated. Excluding those patients would skew the data in the opposite (higher mortality) direction. This has been a major limitation of prior estimates of mortality, and probably why they have been so high.

We did update this sentence to include obesity as a comorbid condition. We used an independently identified citation for it, though. Lighter J, Phillips M, Hochman S, Sterling S, Johnson D, Francois F, Stachel A. Obesity in patients younger than 60 years is a risk factor for COVID-19 hospital admission. Clin Infect Dis. 2020; 71(15):896-897. doi: 10.1093/cid/ciaa415. PMID: 32271368.

This was changed with a minor modification: "Authorities can use this data to establish pharmacoeconomic studies to make decisions about allocation of scarce resources if necessary."

We made some minor changes to the table to update the numbers and make them more understandable. We also updated the reference numbers.

Reviewer #3:
Scientific Quality: Grade C (Good)
Language Quality: Grade B (Minor language polishing)
Conclusion: Minor revision
Specific Comments to Authors: The authors reported data of mortality in severe covid-19. my comments were 1. In the Introduction the authors should add the background why did this study.

The impetus of the study was clarified: "In order to help inform decisions and discussions about critical care interventions in patients with COVID-19 . . ."

Previous data of mortality in ICU, hemodialysis or in ECMO should be added. 2. When search in the data base which the authors did, this article was not included in the final study https://doi.org/10.1016/j.cyto.2020.155393 . 3. All studies included should be checked if the pre-print study have been reviewed? as we knew the pre prints studies have not been reviewed yet, make the quality of systematic review sub standard.

Part of the foundation of systematic review is to follow a search strategy and protocol. Adding or updating studies after the fact based on reviewer suggestions would introduce unnecessary bias and defeat the purpose of a systematic review. The study mentioned could have been not included for 2 reasons. First, it was published in February 2021, which is well outside or search dates. Second, it does not clearly state that patients were in the intensive care unit for admission, just "severe and critical".

4. The limitation of the study: There were observational studies which high risk of bias,not RCT.

This is not a limitation of an epidemiologic study. An RCT would not be a feasible nor ethical method of estimating mortality in an epidemiologic study like this.

Science editor: 1 Scientific quality: The manuscript describes a Systematic Reviews of the Mortality of Critical Care Interventions in the 2019 Novel Coronavirus Disease. The topic is within the scope of the WJMA. (1) Classification: Grade C and Grade C; (2) Summary of the Peer-Review Report: Reviewer 03522829's comment is invalid. The authors reported data of mortality in severe COVID-19. The manuscript summarized literatures to conclude mortality of patients in critical care interventions with COVID-19 which made important sense to the treatment of COVID-19. However, some questions raised by the reviewers should be answered; and (3) Format: There are 4 tables and 1 figure. A total of 39 references are cited, including 35 references published in the last 3 years. There are no self-citations. 2 Language evaluation: Classification: Grade B and Grade B. 3 Academic norms and rules: The authors provided the Biostatistics Review Certificate, and PRISMA 2009 Checklist. No academic misconduct was found in the Bing search. 4 Supplementary comments: This is an invited manuscript. The topic has not previously been published in the WJMA.

Thank you for these kind remarks.

5 Issues raised: (1) The "Author Contributions" section is missing. Please provide the author contributions;

This was updated in the revised submission.

Figure 1 was uploaded as a PowerPoint in the revised submission.

We ensured all references cited in PubMed had a PMID and doi in the reference section. We added all authors to each reference.

This was corrected throughout the main text.

Thank you again for your thoughtful review. The manuscript is certainly improved by it. We hope it is suitable for publication.

Sincerely,

Joshua J. Davis, MD
Rebecca Leff
Anuj Patel
Sriram Venkatesan