

PEER-REVIEW REPORT

Name of journal: World Journal of Virology

Manuscript NO: 74566

Title: COVID-19 pandemic effects on the distribution of healthcare services in India: A

systematic review

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05229914 Position: Editorial Board Academic degree: MD, PhD

Professional title: Chairman, Chief Doctor, Director

Reviewer's Country/Territory: Thailand

Author's Country/Territory: India

Manuscript submission date: 2021-12-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-12-31 01:29

Reviewer performed review: 2021-12-31 04:04

Review time: 2 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer

Peer-Review: [] Anonymous [Y] Onymous

statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

Interesting narrative review pinpointing several issues. Childhood vaccination disruptions is the most frightening. It is sad to see children risking death in preventable conditions. I would welcome an enlarged discussion here with suggestions on how to. Also it is imperative to press politicians to increase the healthcare budget indeed. At the same time, prevention programs for NCDs are needed.



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Reviewer's code: 05630825 Position: Peer Reviewer Academic degree: PhD

Professional title: Lecturer

Reviewer's Country/Territory: Romania

Author's Country/Territory: India

Manuscript submission date: 2021-12-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-11 06:20

Reviewer performed review: 2022-01-14 11:57

Review time: 3 Days and 5 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [Y] Grade C: Good [] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [Y] Grade B: Minor language polishing [] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [Y] Minor revision [] Major revision [] Rejection
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SPECIFIC COMMENTS TO AUTHORS

The author's effort is consistent and taken into consideration for these peer-review comments. However there are some issues which obtained a particular attention: the plagiarism level on Grammarly is 8%, situation which must be improved. Not all the readers are particularly interest in India healthcare system and in this view the article must be integrated in a more larger perspective, otherwise, the article is adequately addressing a national magazine/journal. Point by point: 1 Title. Does the title reflect the main subject/hypothesis of the manuscript? The title seems good for a narrative review precisely oriented in space, time and issue. 2 Abstract. Does the abstract summarize and reflect the work described in the manuscript? The abstract is in line with the content and title. It outlines the main aspects of the healthcare services from India in facing the COVID-19 pandemic. Is well organized and 3 Key words. Do the key words reflect the focus of the manuscript? Healthcare system, COVID-19, Pandemic, India, Vaccination – reflect the focus of the manuscript 4 Background. Does the manuscript adequately describe the background, present status and significance of the study? This narrative review aims to analyze the different factors associated with the unavailability of resources in healthcare facilities during the COVID-19 pandemic in India and highlight how the deficiency of essential healthcare services may contribute to the sustainability of the COVID-19 pandemic in India - status and significance of the study is well addressed. Still, comparative presentations with other regions/states in some respects can be included in a paragraph. 5 Methods. Does the manuscript describe methods (e.g., experiments, data analysis, surveys, and clinical trials, etc.) in adequate detail? The methodology is transparent, but the chosen datebases can be



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exposed. 6 Results. Are the research objectives achieved by the experiments used in this study? What are the contributions that the study has made for research progress in this field? Including some diagrams could make easier to transmit the results. 7 Discussion. Does the manuscript interpret the findings adequately and appropriately, highlighting the key points concisely, clearly and logically? Are the findings and their applicability/relevance to the literature stated in a clear and definite manner? Is the discussion accurate and does it discuss the paper's scientific significance and/or relevance to clinical practice sufficiently? The manuscript present and discuss narrative findings related to the subject. 8 Illustrations and tables. Are the figures, diagrams and tables sufficient, good quality and appropriately illustrative of the paper contents? Do figures require labeling with arrows, asterisks etc., better legends? Are lacking. 9 Biostatistics. Does the manuscript meet the requirements of biostatistics? Not applicable 10 Units. Does the manuscript meet the requirements of use of SI units? Not applicable 11 References. Does the manuscript cite appropriately the latest, important and authoritative references in the introduction and discussion sections? Does the author self-cite, omit, incorrectly cite and/or over-cite references? The 95 references are adequate, actual and accurate in their use. 12 Quality of manuscript organization and presentation. Is the manuscript well, concisely and coherently organized and presented? Is the style, language and grammar accurate and appropriate? The quality for a narrative review is interpreted maybe more subjectively than objectively. 13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) -Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist -Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement -Case Control study, Observational study, Retrospective Cohort study; and (5) The



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ARRIVE Guidelines - Basic study. Did the author prepare the manuscript according to the appropriate research methods and reporting? Non of them applicable for a narrative review. 14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. Did the manuscript meet the requirements of ethics? Not applicable



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Peer-review model: Single blind

Reviewer's code: 05628603 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2021-12-28

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-01-11 07:12

Reviewer performed review: 2022-01-16 15:19

Review time: 5 Days and 8 Hours

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [] Major revision [Y] Rejection
Re-review	[Y]Yes []No



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Peer-reviewer	Peer-Review: [[Y] Anonymous

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

maybe the topic isn't suitable for the journal ang the language still needs polishing

[] Onymous



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: World Journal of Virology

Manuscript NO: 74566

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Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05628603 Position: Peer Reviewer Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: India

Manuscript submission date: 2021-12-28

Reviewer chosen by: Chen-Chen Gao

Reviewer accepted review: 2022-03-23 00:53

Reviewer performed review: 2022-03-23 01:06

Review time: 1 Hour

Scientific quality	[] Grade A: Excellent [] Grade B: Very good [] Grade C: Good [Y] Grade D: Fair [] Grade E: Do not publish
Language quality	[] Grade A: Priority publishing [] Grade B: Minor language polishing [Y] Grade C: A great deal of language polishing [] Grade D: Rejection
Conclusion	[] Accept (High priority) [] Accept (General priority) [] Minor revision [Y] Major revision [] Rejection
Peer-reviewer	Peer-Review: [Y] Anonymous [] Onymous



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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

In this study, the author draw a conclusion, as follows: The Indian health care system was already under pressure before pandemic. The overburden of patients and essential health services were not handled efficiently. Many healthcare facilities were lacking the basic standards of patient care. The vaccination and chronic disease services were hampered due to the shifting of focus to COVID-19. Perhaps, you should collect more convincing data to prove this conclusion, including other developed and developing countries. Only in this way can you draw such a conclusion.