



PEER-REVIEW REPORT

Name of journal: *World Journal of Virology*

Manuscript NO: 77239

Title: Possible agent for COVID 19 treatment; Rifampicin

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06250953

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: Australia

Author's Country/Territory: Turkey

Manuscript submission date: 2022-04-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-04-22 13:28

Reviewer performed review: 2022-04-22 14:29

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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

SPECIFIC COMMENTS TO AUTHORS

The primary aim of this letter to the Editor is to describe the utility of rifampicin in potentially serving as a treatment for COVID. Therefore, going into the detail regarding the available evidence of this efficacy (of rifampicin in treating COVID) should have been the utmost priority. However, the manuscript has gone into very little detail for this, and is a clear weak point of the article. For the manuscript to be publishable, considering the overall purpose of this letter, the authors need to revise the manuscript greatly to include a lot more detail about the potential efficacy of rifampicin based on prior studies. Looking for additional studies, aside from the review that the paper is focusing on, will make this letter stronger. The authors also go into a lot of detail about other drugs such as chloroquine and corticosteroids - it is hard to see the purpose of this in this letter, and how it contributes to the central points. Making this section more concise, and more to the point about positives and negatives of rifampicin as potential COVID treatment, is necessary. There are numerous grammatical issues. Extensive proofreading is recommended.



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Reviewer's code: 05467483

Position: Editorial Board

Academic degree: MD

Professional title: Assistant Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Turkey

Manuscript submission date: 2022-04-20

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-05-31 18:10

Reviewer performed review: 2022-06-06 17:21

Review time: 5 Days and 23 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
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Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The letter to editor covers an interesting topic for role of rifampicin in COVID-19. The original article by Panayiotakopoulos et al published in 2021 is based on in-silico studies from 2020 and 2021 with no further support from lab or clinical trials thereafter. So, it will be interesting to know if there is any further development on this subject in the last 1 year. Furthermore, you have mentioned about interaction of rifampicin with Favipiravir which is not a drug utilized widely for COVID-19 and is not FDA approved yet. Is there any information about interaction with more commonly used drug like Remdesivir? How about interaction with DOACs like apixaban which is metabolized via CYP 3A4 pathway as well.