

PEER-REVIEW REPORT

Name of journal: *World Journal of Hematology*

Manuscript NO: 78934

Title: Venous thromboembolism prophylaxis of a patient with MYH-9 related disease and COVID-19 infection: A Case Report

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05346206

Position: Peer Reviewer

Academic degree: MD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-07-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-07-26 14:41

Reviewer performed review: 2022-08-03 13:40

Review time: 7 Days and 22 Hours

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 Grade E: Do not publish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 checked="" type="checkbox"/> Grade A: Priority publishing <input 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No



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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous
	Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No

SPECIFIC COMMENTS TO AUTHORS

1.The platelet count unit should be unified as 103/uL or 109/L. 2.It needs to be explained how long dose enoxapine prevent DVT.

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Reviewer's code: 06077514

Position: Peer Reviewer

Academic degree: PhD

Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-07-22

Reviewer chosen by: Dong-Mei Wang

Reviewer accepted review: 2022-09-08 05:09

Reviewer performed review: 2022-09-20 16:57

Review time: 12 Days and 11 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
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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SPECIFIC COMMENTS TO AUTHORS

In this case report, a combination of platelet dysfunction and thrombocytopenia contributes to the variable increase in bleeding risk among patients with inherited platelet disorders, such as the May-Hegglin anomaly, related to MYH9. Due to the association between COVID-19 infection and an increased risk of thromboembolic events, anticoagulation in the setting of COVID-19 infection is of interest. This case study aims to provide a pragmatic, informed approach to a patient with MYH9-related disease who indicates anticoagulation. I suggested this manuscript's major revision. The quality of language in this paper is not qualified. Many of the sentences are hard to understand, and no correlation between the case study to explain the COVID-19 infection and an increased risk of thromboembolic events. Thus, It has an inconsistent format, with 11 and 12-point font sizes. Q1. Suggested to provide the statistical support for the background: "Group of diseases associated with myosin heavy chain gene defects, now known as MYH9-related disease (MYH9-RD)(Lines 33-34). Q2. Any citation "Therefore, prompt initiation of anticoagulation upon hospital admission for patients with COVID-19 infection is of utmost importance to prevent thromboembolism and mortality. However, treatment decisions regarding anticoagulation for COVID-19-infected patients with MYH9-RD are challenging because of the potential increased risk of bleeding." (Lines 43-46). Q3. Suggested the section "result" before "discussion." Q4. Although the discussion provided a lot of intervention, what is the new insight from the intervention? Q5. In Lines 126-139, it seems the author would like to mention that prophylactic heparin remains the agent of choice for anticoagulation in patients with severe COVID-19 infection. Can the author provide more information



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and details on COVID-19 management and the patient professions' correlation? Q6. Suggested Table 2 add the section of outcome/ impact of the thrombocytopenia and bleeding risk in major clinical trials. Q7. Any ethical considerations with the hospital consent code or research ID can be provided? Q8. Seems the section of the conclusion is not yet completed.

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Professional title: Professor

Reviewer's Country/Territory: China

Author's Country/Territory: United States

Manuscript submission date: 2022-07-22

Reviewer chosen by: Ze-Mao Gong

Reviewer accepted review: 2022-10-09 16:39

Reviewer performed review: 2022-10-09 16:42

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
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statements

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

SPECIFIC COMMENTS TO AUTHORS

Overall, this manuscript is clear and improved a lot after the revision Thank you so much for the author(s) effort.