

25-March-2021

Dear Dr. Zhao,

We are pleased to inform you that, after preview by the Editorial Office and peer review, as well as CrossCheck and Google plagiarism detection, we believe that the academic quality, language quality, and ethics of your manuscript (Manuscript NO.: 62978, Case Report) basically meet the publishing requirements of the World Journal of Clinical Cases. As such, we have made the preliminary decision that it is acceptable for publication after your appropriate revision. Upon our receipt of your revised manuscript, we will send it for re-review. We will then make a final decision on whether to accept the manuscript or not, based on the reviewers' comments, the quality of the revised manuscript, and the relevant documents. Please follow the steps outlined below to revise your manuscript to meet the requirements for final acceptance and publication.

### 1 MANUSCRIPT REVISION DEADLINE

We request that you submit your revision in no more than 14 days. Please note that you have only two chances for revising the manuscript.

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[Response: We appreciate the editor's work about the manuscript. We are also grateful to the reviewers for their questions which are valuable in improving the manuscript.](#)

### 3 SCIENTIFIC QUALITY

Please resolve all issues in the manuscript based on the peer review report and make a point-by-point response to the issues raised in the peer review report. Authors must resolve all issues in the manuscript that are raised in the peer-review report(s) and make point-by-point responses to the issues raised in the peer-review report(s), which are listed below:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Specific Comments to Authors: In the present case, authors have introduced Thymosin as a possible therapeutic drug for COVID-19. I have several comments. In case presentation section: Please explain the contents continuously, not separately. Please remove Table 1, and write data in text. Some data summarized in Table1 is repeated in text. It is better you write all patient information and result in text.

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Response: We appreciate the reviewer very much for the comments. We note that the information in Table 1 has been described in the text, except for the patient's respiratory rate. So we remove Table 1, and add the contents from line 8-9, page 4 in red font: **20 breaths per minute**.

This sentence: "Considering that the patient had a history of contact with a confirmed COVID-19 patient in Russia, the most likely infection was by SARS-CoV-2". You cannot decide on the probability unless the patient has strong clinical symptoms or a positive COVID-19 laboratory test.

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Response: We thank the reviewer very much for the comments. Considering that we cannot decide on the probability unless the patient has strong clinical symptoms or a positive COVID-19 laboratory test, So we have revised the sentence "the most likely infection was by SARS-CoV-2" to the sentence from line 6-7, page 5 in red font: **combined with the symptoms, signs, and ancillary examinations, the possible infection was by SARS-CoV-2**.

Which commercial kit was used to detect antibodies?

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Response: We thank the reviewer very much for the comments. To improve the rigor of the data, we have added the contents on line 8, page 5 in red font: **the results of the kit produced by Xiamen Innodx Biotech Co. ,Ltd**.

Please indicate the dose of medication.

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Response: We thank the reviewer very much for the comments. To improve the rigor of the data, we have added the contents from line 14-15, page 5 in red font: **thymosin was hypodermic injected twice a week, at 1.6 mg per injection**.

Based on what evidence do you claim that thymosin is involved in the treatment of the disease?

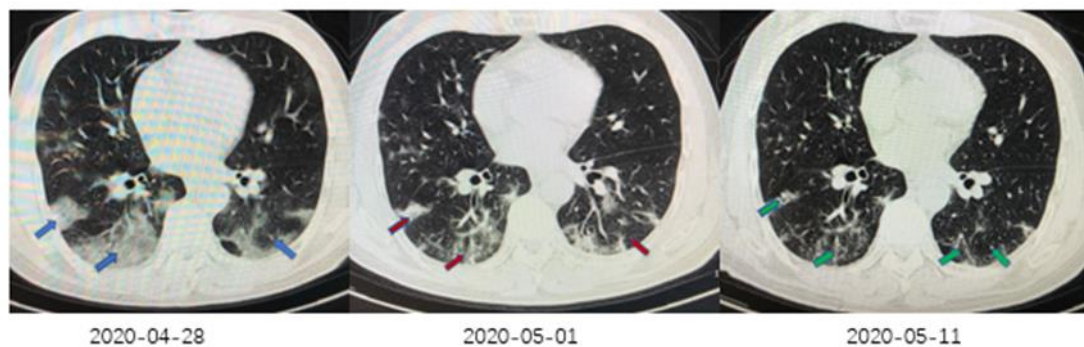
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Response: We thank the reviewer very much for the comments. The patient was also treated with arbidol, lopinavir-ritonavir, but due to obvious nausea, vomiting, and diarrhea, the drug treatments were halted. On April 28, thymosin was hypodermic injected twice a week, at 1.6 mg per injection. So we add the sentence on line 17, page 6 in red font: **which was the only medicine** to claim that thymosin is involved in the treatment of the disease

In figure 1: please add arrows to the figure according to findings.

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Response: We thank the reviewer very much for the comments. We have added arrows to the figure according to findings.



On line 3/5/7 of page 6, we added the words in red font: **blue arrows/ red arrows/ green arrows** respectively.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade A (Priority publishing)

Conclusion: Accept (High priority)

Specific Comments to Authors: Interesting case report about COVID-19 treatment

Please include injection type: IV? how , IM?

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Response: We thank the reviewer very much for the comments. To improve the rigor of the data, we have added the contents from line 14-15, page 5 in red font: **thymosin was hypodermic injected twice a week, at 1.6 mg per injection.**

4 LANGUAGE QUALITY

Please resolve all language issues in the manuscript based on the peer review report. Please be sure to have a native-English speaker edit the manuscript for grammar, sentence structure, word usage, spelling, capitalization, punctuation, format, and general readability, so that the manuscript's language will meet our direct publishing needs.

## 5 EDITORIAL OFFICE'S COMMENTS

Authors must revise the manuscript according to the Editorial Office's comments and suggestions, which are listed below:

- (1) Science editor: 1 Scientific quality: The manuscript describes a case report of the thymosin as a possible therapeutic drug for COVID-19. The topic is within the scope of the WJCC. (1) Classification: Grade B and Grade C; (2) Summary of the Peer-Review Report: The authors reported an interesting case report about COVID-19 treatment. However, the questions raised by the reviewers should be answered; and (3) Format: There is 1 table and 2 figures. (4) References: A total of 13 references are cited, including 6 references published in the last 3 years; (5) Self-cited references: There are no self-cited references; and (6) References recommend: The authors have the right to refuse to cite improper references recommended by peer reviewer(s), especially the references published by the peer reviewer(s) themselves. If the authors found the peer reviewer(s) request the authors to cite improper references published by themselves, please send the peer reviewer's ID number to the [editorialoffice@wjgnet.com](mailto:editorialoffice@wjgnet.com). The Editorial Office will close and remove the peer reviewer from the F6Publishing system immediately. 2 Language evaluation: Classification: Grade A and Grade B. 3 Academic norms and rules: The authors provided the CARE Checklist-2016 and Written informed consent. No academic misconduct was found in the Bing search. 4 Supplementary comments: This is an unsolicited manuscript. The study was supported by 1 grant. The topic has not previously been published in the WJCC. 5 Issues raised: (1) The "Author Contributions" section is missing. Please provide the author contributions; (2) The authors did not provide the approved grant application form(s). Please upload the approved grant application form(s) or funding agency copy of any approval document(s); and (3) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. 6 Recommendation: Conditional acceptance.

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Response: We thank the Science editor very much for the comments. Following the advice of the science editor, we have uploaded the relevant missing files and provided the original images.

(2) Editorial office director:

(2) Company editor-in-chief: I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Clinical Cases, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors.

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Response: We thank the company editor-in-chief very much for the comments.

## 6 STEPS FOR SUBMITTING REVISED MANUSCRIPT

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Please click and download the Format for authorship, institution, and corresponding author guidelines, and further check if the authors names and institutions meet the requirements of the journal.

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Best regards,

Lian-Sheng Ma, Science Editor, Company Editor-in-Chief, Editorial Office

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