

List of Responses

Dear Editors and Reviewers:

Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "A Case Report of Malaria-associated Secondary Hemophagocytic Lymphohistiocytosis and a Review of the Literature" (ID: 63099). Those comments are all valuable and very helpful for revising and improving our paper, as well as the important guiding significance to our researches. We have studied comments carefully and have made correction which we hope meet with approval. The main corrections in the paper and the responds to the reviewer's comments are as following:

Response to Reviewer comments

1. You refer to a travel to Nigeria and Dubai. Geographically it makes little sense: Nigeria is a big country with more than two hundred million inhabitants; Dubai is a city. Correct the details: which cities of Nigeria, where, how long... Dubai (UAE) was declared a decade ago as free from malaria, but imported cases are continuously registered. Please showcase this fact: the origin of malaria was Nigeria; not Dubai (or am I wrong)? If transiting at the airport, it makes no difference: the *P. falciparum* strain was an African one....

Response: We contacted this patient and asked about her travel history in detail. She travelled to Sokoto State Nigeria for 14 days in September 2018. We deleted the section of Dubai travel history.

2. Very few expressions are awkward: --- was diagnosed suspiciously (was suspected ?) ---we made the diagnosis in time (was timely diagnosed ?)

Response: We have modified the description as suggested in page 5 and 9.

3. When you state "artemether is 6 times more potent than of artemisinin"; please quote relevant references. Who has so clearly cut the relative potential of one drug vs. the other ?

Response: We reviewed the literature carefully and made corrections" The effect of dihydroartemisinin is 5 times more potent against malaria than artemisinin", not "artemether" "6 times". This conclusion comes from the article "Eliminating Radiation Resistance of Non-Small Cell Lung Cancer by Dihydroartemisinin Through Abrogating Immunity Escaping and Promoting Radiation Sensitivity by Inhibiting PD-L1 Expression" cited in the article as NO.3 in references.

4. Please use throughout the same style of quoting references (some are in superscript, some

are not).

Response: We unified the style of quoting references.

Response to Science editor:

(1) 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);

Response: Because We did not find the approval documents for the funded project, we deleted the relevant information about the supportive foundation.

(2) 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;

Response: We provided the original figure documents as "63099-Figures.ppt".

(3) PMID and DOI numbers are missing in the reference list. Please provide the PubMed numbers and DOI citation numbers to the reference list and list all authors of the references. Please revise throughout;

Response: We provided the PMID and DOI to the reference and listed all authors of the references following "Format for references guidelines".

(4) The "Case Presentation" section was not written according to the Guidelines for Manuscript Preparation. Please re-write the "Case Presentation" section, and add the "FINAL DIAGNOSIS", "TREATMENT", and "OUTCOME AND FOLLOW-UP" sections to the main text, according to the Guidelines and Requirements for Manuscript Revision.

Response: We have modified the article format following "Guidelines and Requirements for Manuscript Revision: Case Report" and "Format for Manuscript Revision: Case Report".

Special thanks to you for your good comments.

We appreciate for Editors/Reviewers' warm work earnestly, and hope that the correction will meet with approval.

Once again, thank you very much for your comments and suggestions.

Yours sincerely,

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(1) The improvements made to the article are considerable, and the suggestions have been honored. A few language corrections might be needed before the final version takes form: Literatures on malaria-associated HLH are sparse (maybe: literature on malaria..... is scarce...) The patient was was suspected with EBV-related HLH (delete repeated word) Secondary HLH refers to cases caferial, fungal (what is this caferial ???)

Response: Thank you for your letter and for the reviewers' comments concerning our manuscript entitled "A Case Report of Malaria-associated Secondary Hemophagocytic Lymphohistiocytosis and a Review of the Literature" (ID: 63099). We have studied comments carefully and have modified the description as suggested in page 3 ("Literature on malaria-associated HLH is sparse."), page 5 ("The patient was suspected with EBV-related HLH, and she was transferred to our hospital for emergency treatment.") and page 8("Secondary HLH refers to cases caused by infections, malignancy and autoimmune diseases. HLH secondary to infections can occur with viral, bacterial, fungal or parasitic infections; viral infections, especially those caused by EBV, are the most common.") which were highlighted in red. Special thanks to you for your good comments. We appreciate for Editors/Reviewers' warm work earnestly, and hope that the correction will meet with approval. Once again, thank you very much for your comments and suggestions.

Yours sincerely, Xiao Zhou
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