04-05-2021

Dear eminent reviewers and editor:

We deeply appreciate your invaluable suggestions which will make our results clinically more relevant and scientifically sound. We also want to express our gratitude to the editorial office for giving us the opportunity to revise our manuscript. We will reply reviewers' comment point-to-point below.

Reviewer 05813166

The authors describe a case report on a rare variant of Familial HLH in the Chinese population, presenting in early infancy. This is an interesting case report.

- Thanks for your kindness and we hope to share our experience with our pediatric colleagues.

I have the following comments-

1) ABSTRACT- Kindly modify your background. Highlight a few points on what is known regarding FHLH especially in Chinese population.

- We have made change as you suggested.

2) CASE REPORT section- Replace petechial with 'petechiae' Hypotonic should be 'hypotonia' All sections of the case report should have subheadings e.g history, physical examination, investigations, molecular analysis etc. INVESTIGATIONS- Modify this section, first mention all blood reports. LFT, Triglycerides, fibrinogen levels should also be mentioned. It would be a good idea to write them in a tabular form.

- That is a wonderful suggestion. We have re-arranged our case report as suggested.

3) Results from literature search- mention table as 'Table 1'

- For better clarification we have changed "Table" into "Table 1" as you suggested.

4) DISCUSSION- Include a table for HLH 2004 criteria for diagnosing HLH

- We have added the diagnostic criteria into our manuscript.

5) Query regarding patient's death- whether at 3 months or 6 months. In the case report section it is mentioned 6 months but in discussion it is written 3 months. Kindly clarify.

- We have make the correction.

6) Minor modifications required for English language.

- Thanks for your suggestion. Our manuscript has been edited by two American pre-med students as we acknowledged at the end of our main text. Our revised manuscript has been approved by them.

Reviewer 05813166

1) ABSTRACT: Familial hemophagocytic lymphohistiocytosis (FHL2) is a rare genetic disorder presented with fever, hepatosplenomegaly, and pancytopenia secondary to perforin-1 (PRF1) mutation. FLH2 has been described in Chinese but usually presents after one-year-old. We describe a female Chinese neonate with FHL2 secondary to compound heterozygous perforin-1 (PRF1) mutation with symptom onset before one-month-old. We reviewed Chinese FHL2 patients in the literature for comparison.

2) CASE REPORT section

   - It has been rewritten according to the case report format.

3) table change to 'Table 1'

   - We have done so.

4) Diagnostic criteria have been cited in the discussion section

5) Our patient passed away at the age of 3 months at home with fever and jaundice.

6) The paper was revised by associate professor of NICU, Wisconsin

Reviewer 05813659

Thank you to the authors for their work and interesting manuscript. First, this study highlights the importance of genetic studies in FHL patients, and the reporting of genetic data from different geographic areas to determine new pathogenic variants and most prevalent variants in different populations. Second, the manuscript defines the problem well and gives a comprehensive description of the perforin mutations in the Chinese population. Yet some reporting inaccuracies are present in the case description and the literature search and references. They have been highlighted in the manuscript. A shorter title has been suggested. The discussion part may be made a bit

shorter as most of the FHL description has already been descried earlier in the background part of the manuscript.

- We would like to express our gratitude for your diligent effort in revising our manuscript and we have made changes according to your endeavor. The title of the manuscript has been revised according to the reviewer. One more reference has been added in the revised manuscript.