

Dear Editor, Dr. Jin-Lei Wang,

Thank you for providing these detailed review comments. We have specifically and thoroughly addressed each of the suggestions and have indicated where the content was addressed with a copied and pasted portion from the revised manuscript when appropriate, as you will see below.

EDITORIAL CORRECTIONS REQUIRED

REVIEWER 1 - COMMENTS

1. However, this study has been conducted in many countries and routinely in some cities, and some relevant meta-analyses are available on pubmed.

Author response: A study using the PrO2™ device (Design Net, Smithfield USA) has not yet been performed in a group of patients with COPD. We see the uniqueness of this respiratory aid in a very detailed online monitoring of individual respiratory training, including newly introduced parameters (Sustained Maximal Inspiratory Pressure - SMIP, fatigue index test - FIT) using a unique TIRE (Test of Incremental Respiratory Endurance). In addition, the very principle of the performed training based on the fact that the patient determines the training dose according to his current condition before each training, we consider to be really unique and very useful in practice. I consider the reviewer's assertion that this method of therapy has already been performed quite routinely in a number of cities and states untrue. In the Pubmed database, we were unable to find any study or systematic review that includes remotely monitored respiratory rehabilitation with the PrO2™ device (Design Net, Smithfield USA) in a population of patients with COPD. I admit that a number of systematic reviews on the topic of telerehabilitation have been written, but not with the aid we have used, which is truly unique in this respect.

2. It is clear that the article lacks sufficient novelty. In addition, a case report should describe how rare or unusual the case is and its educational and scientific value.

Author response: Our article is an innovative use of the PrO2™ device (Design Net, Smithfield USA), TIRE testing methods and the use and evaluation of new SMIP and FIT parameters (see answer above). Our case study provide the development of possibilities of effective telerehabilitation in the population of patients with COPD rather than the introduction of telerehabilitation as such. The novelty that the paper provides is described in detail in the introduction (pg.4-5).

REVIEWER 2 - COMMENTS

1. There are still some weak points in this paper. It is suggested that the author increase the CT imaging of the patient. This is more conducive to a comprehensive display of the patient's condition.

Author response: Unfortunately, the CT scan is not available and was not our intention, instead we performed standard but valid measurements using spirometry and bodyplethysmography. MIP, SMIP, FIT and ID parameters were measured directly with a PrO2™ device (Design Net, Smithfield USA).

2. This study needs to add a table to visually display the changes of respiratory parameters before and after the test of increased respiratory endurance.

Author response: Thank you very much for the comment. The relevant table is added to the text as a Table 2.

Science editor:

I would recommend the author to reorganize sentences in BACKGROUND, mainly focusing on how important the remote monitoring and evaluation of IMT in real-time is.

Author response: The background section has been reorganized – green colour indicate the changes.

Company editor-in-chief:

1. Please provide the original figure documents.

Author response: We were unable to deliver a high quality image because it was a screenshot. As a result, we have removed the image in the revisions.

Authors response Ad Reviewer 1. According to his negative opinion, we want to express concern and disagreement with Reviewer 1, showing that he has no overview of this issue. If he did look at the PubMed database, he would find that a PrO2™ device (Design Net, Smithfield USA) using TIRE methods had not been used in the population of COPD patients (as with none of the lung diagnoses). This review does not contain any specific comment but only a lot of false information. Overall, the 1st review seems like an expression of a person who wanted to have the report done quickly or does not have a good overview of this issue. Thank you for the opportunity to comment.