

Response letter for “revise and resubmit”

Manuscript ID 84186

entitled "Transient hyperphosphatasemia in a toddler with COVID-19 infection: A case report and literature review"

May 17th, 2023

First of all, we would like to thank the Reviewers for their high quality and constructive reviews of our manuscript, and the Editor for his careful reading. In this revised version of the manuscript, we did our best to address all comments raised by the Reviewers. A detailed item-by-item response to each of the Reviewers' points follows. Our replies are marked in **blue color**

Reviewer(s)' Comments to Author:

Specific Comments to Authors:

Title. I suggest “Transient hyperphosphatasemia in a toddler with COVID-19 infection”

We change the title as reviewer recommendation

Background. Shorter general information about COVID infection, more detail about laboratory abnormalities related with COVID-19 infection and its complications.

We changed content on **page 4 line 115-118** and references on **page 9 line 275 and page 10 line 277**

Discussion. The infections known to be related with Transient hyperphosphatasemia should be given in a table.

We made the table 3 for summary of viral infections associate with TH and changed the content in manuscript on **page 6 line 177**

Reviewer: 2

1. Please distinguish between SARS-CoV-2 infection and COVID-19 all throughout the text (e.g., abstract: COVID-19 infection, should be SARS-CoV-2 infection - and there are several other cases in the paper).

We replace the word of “SARS-CoV-2 infection” with “**COVID-19 infection**” throughout the manuscript (**page 4 line 114 and 122**), except on the **page 5 line 128**

2. Do the Authors have information on the specific variant of SARS-CoV-2 infecting the child?
Our institute’s lab does not have the facility to analyses the specific variant of SARS-CoV-2.

3. When was the case recorded and documented?

The case was diagnosis on December 2021

4. If possible, please expand on the novelty of the case.

Transient hyperphosphatasemia (TH) is a well-recognized benign and self-limited condition of isolated elevated serum ALP level without of bone or liver disease, however, the mechanism of this condition still unknown. Previous studies reported the associated between TH and various viral infections but limited data demonstrates TH could be found in SARS-CoV-2 infection.

It is likely that a rising number of TH cases will be observed along with continuation of the COVID-19 pandemic. Our report could delight the awareness of TH in COVID-19 infection toddler for clinicians and help to avoid additional unnecessary investigations.

The key of management is follow-up monitoring of serum ALP levels to confirm the resolution of hyperphosphatasemia without additional extensive investigation and treatment.

We thank the Reviewer for his/her appreciation of our work.

Voraluck Phatarakijirund, MD