



PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 85797

Title: Comparing the efficacy of casirivimab and imdevimab, remdesivir, and favipiravir in reducing the need for invasive mechanical ventilation in hospitalized COVID-19 patients

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05566451

Position: Editorial Board

Academic degree: PhD

Professional title: Doctor

Reviewer’s Country/Territory: China

Author’s Country/Territory: Egypt

Manuscript submission date: 2023-05-16

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-02 14:19

Reviewer performed review: 2023-07-09 02:37

Review time: 6 Days and 12 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty



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Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

1.Please revise the format of the article. 2.I hope there will be a deeper discussion.



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05080957

Position: Editorial Board

Academic degree: DNB, MBBS, MD

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: Egypt

Manuscript submission date: 2023-05-16

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-07-10 02:51

Reviewer performed review: 2023-07-17 05:00

Review time: 7 Days and 2 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty



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	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

I read your manuscript with interest. Although COVID-19 has almost gone, your article still appears to have a value. However, the manuscript will require major revision before it can be recommended for publication. My assessment reports are mentioned below

Title: Please rephrase to be clear, do not use abbreviation like &. Abstract- ok. Again, do not use &, use and

Introduction: unnecessary information on classifications can be deleted. Just mention a few line why your study is required? What gap of knowledge your study wants to address and what is the aim.

Methods: Was there any inclusion or exclusion based on need of artificial respiration? Why 1:2:2 ratios for allocation? You have mentioned-We use PubMed search tool to find clinical studies - why did you do this? Please be clear. How did you decide on IMV? Any criteria? How did you escalate to IMV? Was HFNC and NIV used? If, used, how did you decide failure? Any objective scores like RoX, modified RoX? In sample size calculation what was you expected



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prevalence or difference taken? Results- Please mention how many were approached, how many excluded, and why? Please follow STROBE. Please include discussion section. Best of luck



RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Professional title: Doctor

Reviewer's Country/Territory: China

Author's Country/Territory: Egypt

Manuscript submission date: 2023-05-16

Reviewer chosen by: Xin-Liang Qu

Reviewer accepted review: 2023-07-19 09:11

Reviewer performed review: 2023-07-19 16:05

Review time: 6 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input checked="" type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
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Peer-reviewer statements	Peer-Review: [<input checked="" type="checkbox"/>] Anonymous [<input type="checkbox"/>] Onymous Conflicts-of-Interest: [<input type="checkbox"/>] Yes [<input checked="" type="checkbox"/>] No
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SPECIFIC COMMENTS TO AUTHORS

1. There are too many spaces on pages 4-8 and 13-16, please adjust the format. 2. I hope there will be a deeper discussion. You can analyze the reasons for your results in detail.



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