

- 1) tNGS should be introduced via its full name (targeted next-generation sequencing) when first mentioned in the main body of the text.

The first mention of tngs in the article was in the abstract section, and currently abbreviations have been introduced through the full name (targeted next-generation sequencing) in the main body of the article.

- 2) There should be more explanation in the introduction about what tNGS actually is and how it works. Is it related to PCR or another technique entirely?

In recent years, high-throughput sequencing method have developed rapidly, mainly including whole genome sequencing(WGS), metagenomic next-generation sequencing (mNGS), and targeted next-generation sequencing (tNGS). Among them, WGS is less directly applied in clinical practice and is generally used in epidemiological investigations and research on the evolution of drug-resistant strains. MNGS can detect all pathogens in the sample without discrimination, while

tNGS mainly focuses on common infectious pathogens in clinical practice. TNGS designs specific primers, uses a super multiplex PCR library system to target and amplify the target sequence, and then uses high-throughput sequencing for synchronous detection of amplification products, achieving a new method of broad-spectrum accurate detection of pathogens.

3) The use of the term "absorbed" is confusing- it is preferable to use the term "resolved" when referring to radiological abnormalities.

Thank you for your suggestions. After consulting relevant literature, it has been changed from 'absorbed' to 'resolved'.

1. Are there controversies in this field? What are the most recent and important achievements in the field? In my opinion, answers to these questions should be emphasized. Perhaps, in some cases, novelty of the recent achievements should be highlighted by indicating the year of publication in the text of the manuscript.

The controversies in this field include: 1. This case report reports a rare clinical co-infection of *Chlamydia psittaci* and *Tropheryma whippelii*; 2. In recent years, high-throughput sequencing technology has played a prominent role in the diagnosis of unexplained pneumonia, mainly including metagenomic next-generation sequencing (mNGS) and targeted next-generation sequencing (tNGS), each with its advantages and disadvantages (discussed in the article). Previous literature has mostly reported mNGS detection, but in this case, tNGS has been used to confirm the co-infection of *Chlamydia psittaci* and TW; 3. In terms of treatment, the first-line medication for *Chlamydia psittaci* is tetracyclines, and there are currently no relevant guidelines for the treatment of Whipple's disease in lung infections. In this case report, only moxifloxacin was used to achieve

good efficacy, providing new ideas for future clinical treatment.

And there is an updated publication year for relevant literature in the article.

2. The results and discussion section is very weak and no emphasis is given on the discussion of the results like why certain effects are coming in to existence and what could be the possible reason behind them?

Thank you for your suggestions. I have organized the discussion of the results: 1. Based on this case, we have conducted a recent literature review on the epidemiology and clinical manifestations of *Chlamydia psittaci* and *Tropheryma whipplei*. 2. Introduced hot high-throughput sequencing technology and compared the advantages and disadvantages of metagenomic next-generation sequencing (mNGS) and targeted next-generation sequencing (tNGS). 3. Summarized the treatment plans for *Chlamydia psittaci* and *Tropheryma whipplei*, but also pointed out that this case did not use first-line treatment but achieved good clinical efficacy.

### 3. Conclusion: not properly written.

By sorting out the case, the OUTCOME AND FOLLOW-UP paragraph of the article has been revised

4.Results and conclusion: The section devoted to the explanation of the results suffers from the same problems revealed so far. Your storyline in the results section (and conclusion) is hard to follow. Moreover, the conclusions reached are really far from what one can infer from the empirical results.

Thank you for your suggestion. We have reorganized the storyline: ① A 40 year old woman was admitted with fever and had a special history of contact with sick parrots before admission. Thoracic CT examination revealed a large area of infection. ② Through recent hotspots in targeted next-generation sequencing technology, it has been found that patients have rare cases of combined infection with *Chlamydia psittaci* and *Tropheryma whipplei*.③Although the preferred drug for *Chlamydia psittaci* is tetracyclines and there are currently no relevant guidelines recommended for *Tropheryma whipplei* in lung infections, the patient only

received significant efficacy with moxifloxacin, providing new ideas and plans for clinical treatment.

5. The discussion should be rather organized around arguments avoiding simply describing details without providing much meaning. A real discussion should also link the findings of the study to theory and/or literature.

Thank you for your suggestion. We have revised the discussion section again, which currently revolves around three points: ① Epidemiological and clinical studies on the *Chlamydia psittaci* and *Tropheryma whipplei*. ② The technology that confirms the rare infection in this case is the currently popular targeted next-generation sequencing(tNGS). ③ The treatment methods for *Chlamydia psittaci* and *Tropheryma whipplei*, as well as the unique characteristics of the case.

6. Spacing, punctuation marks, grammar, and spelling errors should be reviewed thoroughly. I found so many typos throughout the manuscript.

Thank you for your feedback. We have carefully reviewed the grammar, punctuation, and spelling of the article again.

7. English is modest. Therefore, the authors need to improve their writing style. In addition, the whole manuscript needs to be checked by native English speakers.

Thank you for your review. The article has been revised by a professional English polishing company and corresponding proof has been obtained before submission for review.