Reply to the Reviewers' Comments

We would like to express our sincere gratitude to the reviewers for their comments. We have revised our manuscript carefully based on your suggestions, and our point-by-point responses are provided below. We are confident that the quality of our manuscript has improved. The changes in the revised manuscript are highlighted in colored fonts. Please let us know if you have any further questions or if you need any clarification.

Reviewer #1:

Specific Comments to Authors: This is an interesting case, though with limited impact. First of all, vaccination from Covid has proven to be life saving and thus highlighting its possible extremely rare side effect can be a matter of concern to patients opting for vaccine. The authors have to mention clearly what type of vaccine it was...mRNA, protein sub unit or viral vector vaccine?

RESPONSE: The type of SARS-CoV-2 vaccine was an inactivated vaccine (Beijing Institute of Biological Products Co., Ltd., Beijing, China) (Page 4, Line 31, green font). Inactivated vaccines are developed by inactivating the virus using β -Propiolactone, making it lose infectivity and pathogenicity. However, it retains the complete structure of the virus and acquires antigenicity that can be recognized by the immune system[9].

Reference

[9]Deng Tao, Nian X, Zhang J,et al. Development and application of novel inactivated SARS-CoV-2 vaccines.Chinese Journal of Biologicals. 2021,34(07):761-769.

DOI:10.13200/j.cnki.cjb.003388. [Chinese]

CMT disease itself is a rare entity and thus flare up of this disease from vaccination can happen in only one in a million cases. The authors need to

specify clearly that its extremely rare to have this disease from the vaccine. This patient had a strong family history with his siblings having it, so clear mention of that is also essential to validate this diagnosis.

RESPONSE: Thank you for your suggestions. We have included these suggestions in the revised manuscript (Page 9, Line 17; Page 10, Lines 19–20, green font).

The authors mentioned about trying two experimental therapy, i.e IV Erigeron breviscapus and deproteinized calf serum extract. References are needed for them.

RESPONSE: Thank you for your suggestion. We have added corresponding References (Page 6, Line 30, green font).

Reference of abnormal lab values are also lacking.

RESPONSE: Thank you for your reminder. We have added the reference ranges for the lab values (Page 5, Lines 29–31; Page 6, Line 1, green font).

All said and done, it is an interesting red and worth publication once the concerns are addressed.

RESPONSE: Thank you for your recognition and encouragement.

Reviewer #2:

Specific Comments to Authors: Very interesting and well-written case report. Just have a language revision since i found some minor english errors throughout the manuscript.

RESPONSE: Thank you for the information. The manuscript has been revised and proofread by a native English speaker.

LANGUAGE POLISHING REQUIREMENTS FOR REVISED MANUSCRIPTS SUBMITTED BY AUTHORS WHO ARE NON-NATIVE SPEAKERS OF ENGLISH

Authors are requested to send their revised manuscript to a professional English language editing company or a native English-speaking expert to polish the manuscript further. When the authors submit the subsequent polished manuscript to us, they must provide a new language certificate along with the manuscript.

RESPONSE: Thank you for the information. The manuscript has been revised and proofread by a native English speaker, and we have provided a new language certificate along with the manuscript.

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