

(1) Science editor:

The manuscript has been peer-reviewed, and it's ready for the first decision.
Language Quality: Grade B (Minor language polishing)
Scientific Quality: Grade C (Good)

(2) Company editor-in-chief:

Dear Editor!

Thank you so much for your positive evaluation of our manuscript.

All changes in the manuscript were highlighted with green colour.

We shortened the title to 18 words, the new one is "Vaccination coverage in children with juvenile idiopathic arthritis, inflammatory bowel diseases and healthy peers: cross-sectional electronic survey data."

We decreased the number of lines in the table. Cell containing was aligned.

The Cor tips were improved.

Thanks a lot!

On behalf of the authors

Mikhail M. Kostik, MD, PhD, Professor

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Major revision

Dear Reviewer!

Thank you so much for your kind evaluation of our manuscript. Our answers (A) to your queries (Q) are below. All changes are highlighted with green colour in the revised version of the manuscript.

Q1) Specific Comments to Authors: INTRODUCTION - "Biologic therapy with and without immune-suppressors can reliably control inflammatory activity in many patients with immune-mediated diseases, including JIA and IBD." The authors should add a very brief overview of the biological therapies currently used in JIA (Biologics for the Treatment of Juvenile Idiopathic Arthritis. *Curr Med Chem.* 2018;25(42):5860-5893.

doi: 10.2174/0929867325666180522085716) and pediatric IBDs (Clinical Pharmacology in Adult and Pediatric Inflammatory Bowel Disease. *Inflamm Bowel Dis.* 2018 Nov 29;24(12):2527-2542. doi: 10.1093/ibd/izy189; Clinical Pharmacology in Adult and Pediatric Inflammatory Bowel Disease. *Inflamm Bowel Dis.* 2018 Nov 29;24(12):2527-2542. doi: 10.1093/ibd/izy189) by referring to the appropriate references.

A1) Dear Reviewer! The required information and references were added and highlighted.

Q2) "Infections are the most common complications associated with biologic treatment and immune-suppressors (6-8)." The authors should provide a short background information about these infectious complications supported by these references. -

A2) The short background has been added.

Q3) "Vaccination is a well-known and effective tool, which... of view, but studies from parental point of view are limited." I suggest the authors shortening all this part in order to provide the essential background only with general concepts. Actually, some details and information included in this part may better fit and then be used in the discussion.

A3) Dear Reviewer, this part has shortened and some information placed to the discussion section.

Q4) Conversely, a final paragraph clearly stating the general objective of the present study is missing in the introduction.

A4) The aim of our study was changed and highlighted. Some information from this paragraph placed in the discussion section

Q5) METHODS - I suggest the authors to organize all this section in subsections with specific subheadings (not only the statistical part) [e.g. study design and population, ethical statement, survey, data collection, statistical analysis, others] - Moreover, this section should be expanded in my opinion. - "In the cross-sectional study we included the data from a questionnaire survey of 190 legal representatives of children, with JIA (n=81), IBD (n=51) and healthy children HC (n=58)". The information about the eligible patients' responsiveness is a result and then, should be postponed to this section.

A5) Dear Reviewer! Thank you so much for your suggestion. It was done.

Q6) More detailed information about the survey content is needed in the manuscript (of course, the survey could be also provided as supplementary material, as an additional resource). - It is not clear how the HCs were recruited and, in detail, this groups should be clearly defined. - The ethical statement should be added in this section, by including IRB approval date and number, and informed consent information. - The study period is not specified. - Overall, this section should be re-organized and carefully revised.

A6) Dear Reviewer! The survey added as the supplementary. The information about HCs is in the manuscript, they are parents of several schools and kindergartens, their works one of co-author (LS). In our country there is a subject "school medicine", so our university has access to this children's institutions. Ethical statement added, as well as data about consent. The study period was added. This section was reorganized according your suggestions.

Q7) RESULTS - Except for the comment expressed in the previous section, this section is well-organized overall. - However, I would suggest the authors separate the demographics information and surveys results in the table 1. I mean, I suggest one table related to demographic, clinical, and therapeutic aspects, and a different tables to summarize all the survey's results. - the numerical expression of p-values in the table(s) should be standardized and the significant values should be graphically highlighted.

A7) Dear Reviewer! The table was divided in two (table 1 and table 2). Significant p-values are highlighted now.

Q8) DISCUSSION - I suggest the authors to list and highlight the main findings emerging from the present study. - These findings should be discussed one by one in light of the available literature. - Based on the study (which is not clear at the moment), some additional discussion related to COVID19 potential impact on the survey may be appropriate. - Therefore, I think the re-review of this paper and, in detail, discussion can be completed after the additional information is provided and previous comments are addressed.

A8) Dear Reviewer! The discussion section has been elaborated now.

Thanks a lot!

On behalf of the authors

Mikhail M. Kostik, MD, PhD, Professor

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Dear Reviewer! Thank you so much for your evaluation and the positive mark of our study.

Specific Comments to Authors: Children with immune-mediated diseases, such as juvenile idiopathic arthritis (JIA) and inflammatory bowel disease (IBD) are susceptible

to infection. But in the meantime, they often have lower vaccine coverage due to their compromised immune system, and adverse reactions such as fever were frequently reported by their parents. This paper reported the reasons for incomplete vaccinations in these groups. The results are valuable for improve the future vaccination schedule for these children. Hence, I recommend the publication of this paper after addressing the following issues.

Q1. In the section of Results, a fourth part is suggested to clearly show the main reasons for incomplete vaccination.

A1) Dear Reviewer! The 4th part in the results was set up and highlighted.

Q2. Please use more diagrams to intuitively show the survey data and the interactions and associations among these factors.

A2) Dear Reviewer! The figures with diagrams were added.

Q3. Previous reports have reported several reasons for incomplete vaccination mainly from the physicians' point of view. On the other hand, for the parents, there is an information gap. Equivocal advice on vaccination for the parents maybe means 'don't vaccinate'. Therefore, it's better to give a practical program that can be implemented at the end of the text.

A3) Dear Reviewer! The statement about the necessity of educational programs for parents and children has been added in the end of the text.

Q4. In the Conclusion, a statement is suggested to highlight the importance of increasing immunization coverage and implementing advocacy events among special groups.

A4) Dear Reviewer! The recommended statement has been added.

Thanks a lot!

On behalf of the authors

Mikhail M. Kostik, MD, PhD, Professor