

Dear Editor

Please find below our point to point answers to the Reviewers:

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: This paper is suitable for publishing after minor amendments (corrections made directly into the manuscript attached)

We thank Reviewer 1 for the suggestion of minor language polishing. We addressed that in the new version. Our only objection is in the analysis of the abbreviation of CRP. We wrote "C reactive protein" instead of "complement reactive protein" as suggested. CRP was so named because it was first identified as a substance in the serum of patients with acute inflammation that reacted with the cell wall polysaccharide (C-polysaccharide) of pneumococcus (Mold C, Nakayama S, Holzer TJ, Gewurz H, Du Clos TW (November 1981). "C-reactive protein is protective against Streptococcus pneumoniae infection in mice". The Journal of Experimental Medicine. 154 (5): 1703-8. doi:10.1084/jem.154.5.1703. PMC 2186532. PMID 7299351

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: The manuscript (74421) entitled "Case Report of an atypical COVID-19 Presentation with Persistent Hiccup and NSTEMI in a Peritoneal Dialysis Patient" is a case report by Dimitra Bacharaki, et al. The authors reported a case showing an atypical presentation of COVID-19 as nausea, anorexia and persistent hiccup in a peritoneal dialysis patient with ischemic heart failure and NSTEMI. They believe that this clinical picture was the result of heart and central nervous involvement of SARS-CoV-2. Main comments. 1. Please define abbreviations before using them. 2. Please discuss whether the peritoneal dialysis due to cardio-renal problem has anything to do with the occurrence of persistent hiccup.

We thank Reviewer 2 for the appreciation of our article. We addressed his 2 main comments. The abbreviations were defined as suggested. In the discussion we addressed whether cardiorenal problem had anything to do with the occurrence of persistent hiccup. We believe that his suggestion improved the scientific quality of the article.

We also addressed the EDITORIAL OFFICE'S COMMENTS

(1) Science editor:

This manuscript reported a case of persistent hiccups in a peritoneal dialysis (PD) patient diagnosed with COVID-19 and non-ST-segment elevation myocardial injury. When acronyms appear for the first time, please add the full English name; please add in the Discussion section whether peritoneal dialysis due to heart and kidney problems is related to the occurrence of persistent hiccups. In addition, additional clinical and laboratory image evidence is recommended.

Language Quality: Grade B (Minor language polishing)

Scientific Quality: Grade C (Good)

We are thankful for the appreciation of our study. We addressed every requirement asked. We added the full English name as suggested instead of acronyms. We added in the Discussion whether peritoneal dialysis due to heart and kidney problems is related to the occurrence of persistent hiccups. We also added laboratory evidence as recommended in the laboratory section

(2) Company editor-in-chief:

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Virology, and the manuscript is conditionally accepted. I have sent the manuscript to the author(s) for its revision according to the Peer-Review Report, Editorial Office's comments and the Criteria for Manuscript Revision by Authors. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor. In order to respect and protect the author's intellectual property rights and prevent others from misappropriating figures without the author's authorization or abusing figures without indicating the source, we will indicate the author's copyright for figures originally generated by the author, and if the author has used a figure published elsewhere or that is copyrighted, the author needs to be authorized by the previous publisher or the copyright holder and/or indicate the reference source and copyrights. Please check and confirm whether the figures are original (i.e. generated de novo by the author(s) for this paper). If the picture is 'original', the author needs to add the following copyright information to the bottom right-hand side of the picture in PowerPoint (PPT): Copyright ©The Author(s) 2022.

We are thankful for the acceptance of our study. We addressed all the requirements for the figure in the revised version