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OPEN PEER REVIEW

COVID-19 in Children: Clinical Presentations and Outcomes in Fayoum Governorate, Egypt

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About this report

This open peer review (OPR) report shows the public comments made on this article during peer review, by the reviewers, the associate editor and the editor-in-chief, for every revision round, together with the authors' replies. Comments appear only with the consent of the people who wrote them. Reviewers who chose to sign their report are named; the others are shown as "Referee". Comments are edited for language only, and confidential remarks to the editors are not included.

More about open peer review: brieflands.com/knowledgebase/opr

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1 Original submission

4 comments · 22 Mar 2021 – 15 Apr 2021

Associate Editor

MINOR REVISION 22 Mar 2021

Dear author
1-This study is not a case series but a descriptive cross-sectional study.
2-Explain in full how the sample population was selected.
Regards

Referee 1 Reviewer

MAJOR REVISION 5 Apr 2021

"A study in a Cohort of Children in Fayoum, Egyp": the title should be changed; do not mention a cohort of children in the title.
line 8- Clarify whether these patients were inpatients or outpatients and whether they had symptoms or were just suspected cases because of known contact. It is very important to clarify the population and clinical situation, whether the study was retrospective or prospective, and the study period if it is a cohort study.
linec34- "no effective safe vaccine is available until this moment" ... The data seem too old!
line 35- Children older than 12 years: the FDA approved remdesvir for use in children and adults on 22 Oct 2020.
line 53- It is not in Egypt as a whole, but in a governorate.
line 55- It is not a case series; it is a cross-sectional study. However, it is not clear whether it was conducted on patients admitted to the hospital with a diagnosis of COVID and whether all PCR-positive patients were included. Please define the population clearly.
line 81- 10 cases were asymptomatic. Why did you test them?
Correct table 1.

table 3- The mean or median of the data is not important; it is better to report the percentages of normal and abnormal laboratory results.
The discussion should be revised. Do not repeat the results; just discuss the results and data from other studies, their agreement or disagreement, and the reasons.
English grammar and structure need to be revised.

Referee 2 Reviewer

REJECT 13 Apr 2021

Thank you for your manuscript, but your study has no novelty. I have some comments:
Abstract
-The objectives are meaningless. Please define them better.
-Which word does GGO abbreviate?
-Autoimmunity is not suitable; inflammation alone is enough.
Keywords
-Please add COVID-19 to your keywords. Delete prescription.
Title: Your study is cross-sectional, not a cohort study.
Background

-Please write the ethics committee code for your study.
-Your study is cross-sectional, not a case series. The time (year) of your study should be mentioned.
-Inclusion and exclusion criteria should be written.
-Why did you perform chest CT for all patients? There should be an indication for it.
-Statistical methods and software should be described in the patients and methods section, not in the results.
Results
-Results should be concise and comprehensive. Most of the results could be presented in Tables. Treatment should be deleted.
-What is the meaning of positive and negative CRP in Table-3?
-If the distributions of quantitative variables such as age and laboratory tests weren't normal, you have to report the median and interquartile ratio (IQR), not the median and range.
-The median of D-dimer is 0.2. It is impossible.
Discussion
-In the first part of your discussion, you have to write the main results of your study very briefly, not introduce some cases in detail. Thereafter, you should compare your results with those of other studies and mention the probable causes of their similarities and differences.
-The limitations of your study weren't reported.
-Your discussion is inconclusive and should be revised completely.
Conclusion
-Should be written in a maximum of 6 sentences. Your conclusion is meaningless.
Footnotes
Acknowledgment, funding support with the grant number, conflict of interest, and the author's contributions should be written.
References
The format of your references is not compatible with the journal's requirements. For example, you have to list 6 authors and then et al.

Associate Editor

MAJOR REVISION 15 Apr 2021

Dear authors
Your manuscript has been reviewed by reviewers, some of whom raised significant objections to the manuscript. Therefore, please follow the reviewers' comments exactly and respond to their comments point-by-point. All changes should be highlighted with different colors before the next submission. Also, the English language should be improved.
Thanks

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear sir, thanks for your useful comments

Reviewer 1:

Q: Objectives is meaningless. Please define it better.

R: Changed to be concised

Q: GGO is the abbreviation of which word?

R: Ground glass opacity added

Q: Autoimmunity is not suitable, only inflammation is enough.

R: Changed in the manuscript

Keywords

Q: Please add covid-19 to your keywords. Delete prescription.

R: Added to key words

Q: Title: Your study is cross-sectional not cohort.

R: The title changed

Background

Q: -Please mention the reason of performing your study?

R: Mentioned

Patients and methods

Q:-Please write the ethics committee code of your study.

R: Added to the manuscript

Q: -Your study is cross-sectional, not case series. The time (year) of your study should be mentioned.

R: The time mentioned

Q:-Inclusion and exclusion criteria should be written.

R: Added to the manuscript

Q: -Why did you perform chest CT for all patients? It should have indication.

R: (it was routine in the beginning of pandemic in Egypt for all cases with chest symptoms).

Q:-Statistical methods and software should be written in patients and methods section, not in results.

R: Changed to patient and method section

Results

Q -Results should be concise and comprehensive. The most of the results could be written in Tables. Treatment should be deleted.

R results written in Tables. Treatment deleted

Q -What is the meaning of positive and negative CRP in Table-3?

R Negative less than 6 & positive more than six

-If the distribution of quantitative variables such as age and laboratory tests weren't normal, you have to report median and interquartile ratio (IQR) not median and range.

Q -The median of D-dimer is 0.2. It is impossible.

R 0.2 mcg/mL equals 200 ng/mL

The reference concentration of D-dimer is < 250 ng/mL, or < 0.4 mcg/mL

Discussion

Q: -At first part of your discussion you have to write the main results of your study very briefly, not introduce some cases with details. Thereafter you should compare your results with other studies and mention the probable causes of their similarities and differences.

R Other studied were added

Q -Limitations of your study weren't reported.

R Reported and added to the discussion

-Your discussion is inconclusive and should be revised completely.

R Done and Revised

Conclusion

Q -Should be written in maximum 6 sentences. Your conclusion is meaningless.

R Changed and shortened

Footnotes

Q Acknowledgement, funding support with grant number, conflict of interest and author's contributions should be written.

R Added

References

Q The format of your references is not compatible with the journal. For example you have to write 6 authors and then et al. response : done

Reviewer 2:

Q A study in a Cohort of Children in Fayoum, Egypt: title should change ,in title don't mention to cohort of children

R The title was Changed

line 8- clear this patient were in patient or out patients ,with symptom or just suspected because known contact, it is very important to clarify sort of papulation and clinical situation, it was retrospective or prospective ,the time of study if it is cohort study

it is a prospective study for , in patient in quarantine section of university hospital

q line 34- no effective safe vaccine is available until this moment ....data seems too old!!!!!

R This was at time of the study , early in the pandemic

Q line 35- children older than 12 years, FDA approved remdesvir for use in children and adult on 22 oct 2020

R the line removed

Q .line 53- it is not in Egypt , in a governate

r changed

q line 55- it is not case series ,it is cross sectional study ,but it is not clear it was done on patient who admitted to hospital with diagnosis of covid and all pcr positive were included or not ,please define population clearly

r for inpatient and all pcr positive

q line 81- 10 case were asymptomatic, why did you do test for them?

R Early in the pandemic PCR was done for all surrounding of confirmed case of covid-19, so these children investigated and hospitalized even they were normal to prevent spread of the infection

Q correct table 1, table 3-the mean or median of data is not important ,it is better to mention to normal and abnormal percentage of lab data

r: revised and changed

q:discussion should revised . don't repeat result again just discuses about result and other surveys data, agreement do disagreement and the reasons

r: revised and changed

q: English grammar and structure need to revise

R: Revised

2 Revision 1

2 comments · 23 May 2021 – 27 May 2021

Associate Editor

MINOR REVISION 23 May 2021

Dear author
1- This study is not a cohort study; it is a descriptive study. Since the patient outcomes are also mentioned, it can be called a longitudinal descriptive study, but since the course of the disease and the time of onset of symptoms are not explained, this study does not meet the standards for a longitudinal descriptive study; therefore, either include statistics on the incidence and changes in disease indicators in the study or introduce the study as a cross-sectional study.
2- Exclusion criteria should be a subset of inclusion criteria. For example, if one of the inclusion criteria is an age under 18 years, an age over 18 years should not be mentioned again as an exclusion criterion; rather, the exclusion criteria are characteristics that lead to the exclusion of children under 18 years of age.
Regards

Associate Editor

MAJOR REVISION 27 May 2021

Dear authors
The manuscript's overall presentation improved partly after amendments; however, some essential revisions should be considered in the new submission. The manuscript is written with little care both in scientific content and in the English language. The manuscript should be copy-edited before the next submission.
Thanks
Editor comments:
Comments that remained unanswered in the previous round:
Q: -Please mention the reason for performing your study.

Other shortcomings:
Use a consistent format for COVID-19. Remove all forms other than "COVID-19"; for example: [Covid]; [COVID 19]; [Covid-19] and replace them with the correct term.

Line 9: "Patients and Methods:" is correct.

Line 10: "Our study conducted from the beginning of June 2020 to the end of October 2020"

Line 15: "with respiratory symptoms" is correct.

Spell out "SARS-COV-2" in the keywords.

Line 56: Your study is cross-sectional.

Lines 58-69: This part is provided as separate words. Rewrite it in complete sentences.

Line 124: remove "(ground glass appearance)".

Line 144-145: "bilateral GGOs" is correct.

Line 145: spell out [c/o].

Line 147: "bilateral GGOs" is correct.

Line 148-151: remove "The previous finding is in accordance with Parisi et al., 2020 who conclude the severity of Covid respiratory infection clinically classified as asymptomatic, mild, moderate, severe, or critical with need

to mechanical ventilation.(15)"

Line 207-208: "small GGO" is correct.
208 appearance

Line 239: remove "typical viremia to atypical presentations with severe inflammation", and replace it with "asymptomatic to severe symptomatic phenotypes needs intensive care interventions".

Line 241-244: remove this part "The atypical presentation of the virus may
be aplastic anaemia, Gillian parry syndrome, acute renal failure, Kawasaki disease and multisystem inflammation of children. Further researches are needed to explore the cause of abnormal unusual presentations of the virus and the underlying genetic background."; only five cases with such a presentation have been reported, so this could not be conclusive.

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Revision 2

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear sir:

All instructions were done

Thank you very much for useful comments.

1- This study is not a cohort study; it is a descriptive study. Since the patient outcomes are also mentioned, it can be called a longitudinal descriptive study, but since the course of the disease and the time of onset of symptoms are not explained, this study does not have longitudinal descriptive standards; Therefore, either include statistics on the incidence and changes of disease indicators in the study or introduce the study as a cross-sectional study.

2- Exclusion criteria should be a subset of inclusion criteria, for example, if one of the inclusion criteria is under 18 years of age, age over 18 years should not be mentioned again as exclusion criteria, but characteristics that lead to exclusion of children under 18 years of age, are the exclusion criteria.

Regards

Associate Editor 2:

Dear authors

The manuscript's overall presentation improved partly after amendments; however, some essential revisions should consider in the new submission. The manuscript is written with little care both in scientific content and in the English language. The manuscript should be copy-edited before the next submission.

Thanks

Editor comments:

Comments that remained unanswered in the previous round:

Q: -Please mention the reason for performing your study?

R : to record different clinical presentations of "COVID-19" in Egyptian children in Fayoum Governorate, to detect the percentage of children with complicated "COVID-19" infection. and to show the clinical and laboratory presentations, the final outcome of "COVID-19"children in Fayoum, Egypt.

Other shortcomings:

Use a similar format for COVID-19. Remove all other words than "COVID-19" ; for example: [Covid]; [COVID 19]; [Covid-19] and replace them with correct term.

Line 9: "Patients and Methods:" is correct.

Line 10: "Our study conducted from the beginning of June 2020 to the end of October 2020",

Line 15: "with respiratory symptoms" is correct.

Spell out "SARS-COV-2", in keywords

Line 56: Your study is cross-sectional.

Lines 58-69: This part provided in separate words. Rewrite it in complete sentence format.

Line 124: remove "(ground glass appearance)"

Line 144-145: "bilateral GGOs" is correct.

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Line 148-151: remove "The previous finding is in accordance with Parisi et al., 2020 who conclude the severity of Covid respiratory infection clinically classified as asymptomatic, mild, moderate, severe, or critical with need to mechanical ventilation. (15)"

Line 207-208: "small GGO" is correct.

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Line 239: remove "typical viremia to atypical presentations with severe inflammation", and replace it with "asymptomatic to severe symptomatic phenotypes needs intensive care interventions".

Line 241-244: remove this part "The atypical presentation of the virus may

be aplastic anaemia, Gillian parry syndrome, acute renal failure, Kawasaki disease and multisystem inflammation of children. Further researches are needed to explore the cause of abnormal unusual presentations of the virus and the underlying genetic background."; only five cases reported by such presentation, so it could not be conclusive.

All instructions were done

Thank you very much for useful comments.

3 Revision 2

1 comment · 21 Jun 2021

Associate Editor

MINOR REVISION 21 Jun 2021

Thank you for submitting your revision. However, in order to further process your paper, a minor correction is needed:
In this part, remove "Objective": Objective: In this research article, ...
As previously requested, use a similar format for all instances of "COVID-19". For example, use uppercase for "covid" in the following statement: "One of the uncommon presentations of covid-19 was acute renal failure in one child in our study aged 5 years. The child was completely normal before infection with covid-19."
Search the whole manuscript for any typographical errors.

4

Revision 3

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear sir:

All instructions were done

Thank you very much for useful comments.

Associate Editor 1:
Thank you for submitting your revision. However, in order to further process your paper, minor correction is needed:

q. In this part remove "Objective": Objective: In this research article, ...

r. removed

q. As previously requested, use a similar format for all "COVID-19". For example, use uppercase for "covid" in the following statement: "One of the uncommon presentations of covid-19 was acute renal failure in one child in our study aged 5 years. The child was completely normal before infection with covid-19."

r. corrected

q.Search the whole manuscript for any typo errors.

r. Searched

4 Revision 3

1 comment · 1 Jul 2021

Associate Editor

ACCEPT 1 Jul 2021

I read the revised manuscript.
I have no further comments to add. I thank the authors for their very detailed replies to my comments.