OPEN PEER REVIEW

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As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Long-Term Treatment with Antithyroid Drugs: Efficacy and Safety"

Author(s): Ramin Malboosbaf , Fereidoun Azizi

Review Timeline:

Submit Date: 17 Feb 2020
Revised Date: 27 Apr 2020
Accepted Date: 2 May 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0)

9 Mar 2020

Dear AE,

In this review, the authors tried to mention the pros and cons of long-term antithyroid therapy but some points need to be clarified.

1- What is the aim of this review? Should be mentioned in the introduction.

2- Page 4, what do the authors mean by “indirect effects on the immune system?

3- Page 4, the sentence” it is unclear that which if those …..” needs to be revised.

4- Page 4, the sentence” it is supposed to the production of superoxide ….” Needs editing.

5- Many parts of this review belong to fundamental knowledge of antithyroid drugs. I suggest summarizing these parts, such as clinical implications.

6- Page 5, the sentence” the patient in remission when remained euthyroid…..” needs to be revised.

7- Page 5, the sentence “Although hyperthyroidism later replaces in one-third of patients initially attaining a remission…..” needs a reference.

8- Page 5, the sentence after “The most consistent features “please add “predicting remission must be added.

9- In remission from Graves' disease, some important issues such as genetic, baseline TSH, should be added to the predictive factors.

10- Page 7, the sentence “ conducted that TRAb assay by itself, even with different cutoff values……” This cannot be concluded from a review article. It should be clarified.

11- In remission part: it is worthy to add the study has done by Wiersinga et al (JCEM, volume 101, Issue 4, 1 April 2016, Pages 1381–1389, https://doi.org/10.1210/jc.2015-3644).
12- It is better to add one paragraph regarding long-term ATDs in children below the age of 18.
13- Page 7 the 2nd paragraph, sentence" further paper by the same author…." Should be changed.
14- The author needs to limit the adverse reactions to long-term MMI therapy and show the available literature in this regard and mention the gap in present evidence.
15- Some points should be highlighted including:
- What is the gap in evidence regarding long-term treatment.
- What would be the benefits of this treatment protocol?
- What is the future mind-map to help to answer the important relevant question.
16- The manuscript needs to be critically edited grammatically.
Thanks.

REFEREE: Reviewer | **Revision** (0) 4 Apr 2020

Dear AE,
I read the manuscript entitled "Long-term treatment with antithyroid drugs: Efficacy and safety" prepared for a special issue of IJEM. My comments are as follows:
1) Please consider the "Instructions for Authors" of the IJEM for the review article. "Abstract" and "Main text" should include sections of Context, Evidence Acquisition, Results, and Conclusions. Moreover, the aim of the study has not been mentioned.
2) Page 6, paragraph 2, the sentence "Thus, we believe that TRAb assays, by current methodology, look like a blunted tool for prediction of remission or relapse of GD": with regards to the statements in the next paragraph, this sentence is not appropriate and should be modified.
3) Page 6, the section of "Long-term ATD therapy": Sentences of the first paragraph need to be revised and re-written considering their references.
4) Tables 1 and 2 are duplicates of the text and are also included in previous articles on this topic. Please replace them with another informative table(s) for example regarding studies of long-term ATD therapy.
5) There are some typos throughout the manuscript; English grammar editing is needed.
Thanks.

REFEREE: Associate Editor | **Revision** (0) 4 Apr 2020

Dear EIC,
The manuscript needs some revisions before consideration for publication.
Thanks.

REFEREE: EIC | **Revision** (0) 4 Apr 2020

Dear Author,
Your article is reviewed by the reviewers carefully. According to their comments, this document needs major revision. Please follow their comments as requested.
Thanks.

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Response to reviewer 1

Thank you for your general comments and issues. We have revised the manuscript based on your valuable suggestions and comments.

1- Agreed and corrected.
2- Agreed and modified. Page 7, paragraph 3.
3- Agreed and corrected. Page 8, paragraph 2.
4- As you exactly mentioned, table 1 is cited from The 2016 ATA Guidelines, as we thought this table could be a good guide for starting dose of ATD. Table 2 is extracted from our review focusing on timing onset of complications. (Ref 27, 38, 60, 70, 75, 76, 77, 79, 83, 86, 87 and 93)
5- Agreed and corrected.

Response to reviewer 2

We appreciate your very comprehensive discussion. We have revised the manuscript based on your valuable suggestions and comments.

1- Agreed and corrected.
2- Brief point out to indirect effect is in Page 4, paragraph 4.
3- Agreed and corrected. Page 4, paragraph 4.
4- Agreed and corrected. Page 5, paragraph 1.
5- Agreed and summarized.
6- Agreed and revised. Page 6, paragraph 3.
7- Agreed and corrected. Ref 30.
8- Agreed and corrected. Page 6, paragraph 4.
9- Agreed and corrected. Page 6, paragraph 4.
10- Agreed and corrected. Page 7, paragraph 3.
11- Agreed and added. Ref 44.
12- Agreed and one paragraph regarding long-term ATDs in children was added. Page 9, paragraph 4.
13- Agreed and corrected. Page 8, paragraph 4.

14- Agreed and corrected.
15- Agreed and corrected.
16- Agreed and corrected.

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Associate Editor | **Revision** (1) 2 May 2020

Dear EIC,
The revised manuscript is acceptable for publication in the IJEM.
In the article proof, reference of Figure 1 (Ref. 75) should be added in the figure legend.
Thanks.

REFEREE: EIC | **Revision** (1) 2 May 2020

Dear Author,
The document is reviewed carefully by the reviewers. According to their comments and your revisions as requested, this manuscript is accepted.
Thanks.