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 "**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

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Peer Review

International Journal of Infection
Article DOI: https://doi.org/10.5812/iji.111652
Published in: International Journal of Infection: 9(1) ; e111652

Peer Review Report for "Multidrug Resistance of *Neisseria gonorrhoeae*: Antibiotic Stewardship and Prospective Treatment Alternatives"

Author(s): Marvellous Oluebube Asika, Emmanuel Ebuka Elebesunu, Joel Kosisochukwu Edeh

Review Timeline:

Submit Date:	6 Dec 2020
Revised Date:	9 Nov 2021
Accepted Date:	21 Dec 2021

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 — 2 Mar 2021

Dear AE
Recommended comments include:
There are no references in the text.
Check article references again.
Best regards.

REFEREE : Reviewer — 9 Aug 2021

Dear AE
This article was prepared as a letter to the editor about the problem of the multidrug

resistance of N. gonorrhoeae. The article is interesting and draws attention to this warning. This article also discusses some of the treatment and prevention strategies. Both the US and European guidelines were significantly revised in 2020. The author should change and correct it. (Reference No. 5)
https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf :

“Dual therapy for gonococcal infection with ceftriaxone and azithromycin, recommended in previous guidance, might have mitigated the emergence of reduced susceptibility to ceftriaxone in N. gonorrhoeae; however, concerns regarding potential harm to the microbiome and the effect on other pathogens diminish the benefits of maintaining dual therapy. Consequently, only ceftriaxone is recommended for treating gonorrhea in the United States (872). Clinicians remaining vigilant for treatment failures is paramount, and CDC plans to continue to monitor for changing ceftriaxone MICs until additional antimicrobials or a vaccine are available.”
Best regards.

REFEREE : Reviewer

23 Aug 2021

Dear AE
1- There are no references in some sentences.
2- There is no table or curve in manuscripts about the results of different studies.
3- There are just 10 references in this manuscript as a review.
4- insufficient information about phage therapy and anti-bacterial peptides.
5- The authors did not discuss herbal drugs as an alternative.
Best regards.

REFEREE : Associate Editor

24 Aug 2021

Dear EIC
Please ask the author to correct the following comments
Reviewer1;
1- There are no references in some sentences
2- There is no table or curve in manuscripts about the results of different studies
3- There are just 10 references in this manuscript as a review
4- insufficient information about phage therapy and anti-bacterial peptides
5- The authors did not discuss herbal drugs as an alternative
Reviewer2:
This article was prepared as a letter to the editor about the problem of the multidrug resistance of N. gonorrhoeae. The article is interesting and draws attention to this warning. This article also discusses some of the treatment and prevention strategies. Both the US and European guidelines were significantly revised in 2020. The author should change and correct it. (Reference No. 5)
https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf :
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recommended in previous guidance, might have mitigated the emergence of reduced susceptibility to ceftriaxone in N. gonorrhoeae; however, concerns regarding potential harm to the microbiome and the effect on other pathogens diminish the benefits of maintaining dual therapy. Consequently, only ceftriaxone is recommended for treating gonorrhea in the United States (872). Clinicians remaining vigilant for treatment failures is paramount, and CDC plans to continue to monitor for changing ceftriaxone MICs until additional antimicrobials or a vaccine are available."
Reviewer3:

There are no references in the text.
Check article references again.
Best regards.

Hamidreza Kouhpayeh : EIC

24 Aug 2021

Dear author
Please correct all comments in the manuscript point by point.
Reviewer1;
1- There are no references in some sentences
2- There is no table or curve in manuscripts about the results of different studies
3- There are just 10 references in this manuscript as a review
4- insufficient information about phage therapy and anti-bacterial peptides
5- The authors did not discuss herbal drugs as an alternative
Reviewer2:
This article was prepared as a letter to the editor about the problem of the multidrug resistance of N. gonorrhoeae. The article is interesting and draws attention to this warning. This article also discusses some of the treatment and prevention strategies. Both the US and European guidelines were significantly revised in 2020. The author should change and correct it. (Reference No. 5)
https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf :
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Reviewer3:

There are no references in the text.
Check article references again.
Best regards

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 REVIEWERS COMMENTS

Reviewer 1 Comment:

This article was prepared as a letter to the editor about the problem of the multidrug resistance of *N. gonorrhoeae*. The article is interesting and draws attention to this warning. This article also discusses some of the treatment and prevention strategies.

Both us and European guildlines significantly revised in 2020. It is better for the author to change and correct it. (Reference No. 5)

https://www.cdc.gov/std/treatment-guidelines/STI-Guidelines-2021.pdf

“Dual therapy for gonococcal infection with ceftriaxone and azithromycin recommended in previous guidance might have mitigated emergence of reduced susceptibility to ceftriaxone in *N. gonorrhoeae*; however, concerns regarding potential harm to the microbiome and the effect on other pathogens diminishes the benefits of maintaining dual therapy. Consequently, only ceftriaxone is recommended for treating gonorrhea in the United States (872). Clinicians remaining vigilant for treatment failures is paramount, and CDC plans to continue to monitor for changing ceftriaxone MICs until additional antimicrobials or a vaccine is available.”

Response to Reviewer 1:

Thank you for reviewing our manuscript. Your suggestions have been implemented and the changes have been highlighted accordingly in the manuscript.

Reviewer 2 Comment:

There are no references in the text.

Check article references again.

Response to Reviewer 2:

Thank you for reviewing our manuscript. All references have been applied as in-text citations to the body of the manuscript accordingly.

Reviewer 3 Comment:

1- there is not references in some sentences

2- there is no table and curve in manuscripts about results of different studies

3- there are just 10 references in this manuscript as review

4- insufficient information about phage therapy and anti-bacterial peptides

5- Authors did not discuss about herbal drugs as alternative

Response to Reviewer 3:

Thank you for reviewing our manuscript. In-text citations and references have been arranged accordingly in the body of the manuscript. The prospects of herbal drugs as treatment alternatives has been addressed in the article, and the changes have been highlighted. However, please note the following:

- The Manuscript is a Letter to the Editor, not a Review article.

- As such, the maximum word count stipulated by the journal is 1,500 words. Elaborating on phage therapy and antibacterial peptides will require going beyond the word limit.

- The maximum number of references for a Letter, as stipulated by the journal is 10 references. Although the bibliography has been extended to 12 references, this is more than the number of references stated by the journal. Adding more references than this will not be suitable for a Letter to the Editor.

- The manuscript simply gives an overview of multidrug resistance in gonorrhea infections and calls attention to the search for treatment alternatives, but does not have any primarily generated or collated data analyzing the results of the various research studies. This is because the manuscript is simply a Letter, not a Review paper, hence, the reason for the absence of tables or curves in the manuscript.

OPEN PEER REVIEW

Revision (1)

REFEREE : Reviewer — 18 Sep 2021

Dear AE
The required modifications have been made.
Best regards.

REFEREE : Reviewer — 5 Nov 2021

Dear AE
Reference No. 5 (CDC, Guidelines 2015) has not changed to CDC, Guidelines 2021.
Best regards.

REFEREE : Associate Editor — 6 Nov 2021

Dear EIC
Please ask the author to correct the following comment
Reference No. 5 (CDC, Guidelines 2015) has not changed to CDC, Guidelines 2021.
Best regards.

Hamidreza Kouhpayeh : EIC — 6 Nov 2021

Dear Author
Please correct the following comment in the manuscript.
Reference No. 5 (CDC, Guidelines 2015) has not changed to CDC, Guidelines 2021.
Best regards.

OPEN PEER REVIEW

Revision (2)

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'S COMMENT

Reviewer 1 Comment:

Reference No. 5 (CDC, Guidelines 2015) has not changed to CDC, Guidelines 2021.

Response to Reviewer 1:

Thank you for reviewing our manuscript. Your suggestion has been implemented and Reference No. 5 has been updated with the 2021 STI treatment guidelines from the Morbidity and Mortality Weekly Recommended Reports of CDC.

OPEN PEER REVIEW

Revision (2)

REFEREE : Reviewer — 20 Dec 2021

Dear AE
I have no comment.
BEST REGARDS

REFEREE : Associate Editor — 21 Dec 2021

Dear EIC
This article has been accepted into the International Journal of Infection and will be published in future issues.
Best regards.

Hamidreza Kouhpayeh : EIC — 21 Dec 2021

Dear Author
Your article has been accepted into the International Journal of Infection and will be published in future issues.
Best regards.