OPEN PEER REVIEW

Open Peer Review (OPR)

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.

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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

Iranian Journal of Pediatrics
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Peer Review Report for "The Impact of Obstructive Sleep Apnea-Hypopnea Syndrome on T-Lymphocyte Subgroups and Natural Killer Cell Activity in the Peripheral Blood of Children"

Author(s): Lili Huang, Yimin Chen, Jiarong Wang, Liansheng Qiu

Review Timeline:

Submit Date: 2 Apr 2020
Revised Date: 2 Oct 2020
Accepted Date: 7 Oct 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)

12 Apr 2020

Dear AE,
There are some comments which should be addressed by the author:
1. Title and Abstract
Minor revision: the title is informative. The method for the lymphocyte subsets and NK activity should be mentioned. The conclusion should be clear and based on the obtained results (not the probability).
2. Introduction
Minor revision: the research question, novelty, importance should be mentioned. The statement of this work's possibility to „provide a reference for clinical diagnosis and treatment“ (p. 4) should be clarified.
3. Materials and methods
Major revision: this section lacks consistency. It should be clearly stated which instrumental and laboratory tests were performed on both groups. The cellular testing procedure should be described consequentially: sample collection, cell suspension preparation, analysis, interpretation. The inclusion/exclusion criteria should state just the criteria, not the classification. Were there any children with autoimmune disorders, immune

deficiencies? Is there any information about the frequency of the upper respiratory tract infections in both groups? The names of the exact laboratory tests should be mentioned (p. 5).

Minor revision:

The used analyzer, manufacturer, country of origin should be stated in the parenthesis while citing the performed laboratory tests. Identify the used antibodies: full name, manufacturer, catalog No, Lot. No.

4. Results

The results are clearly stated.

5. Discussion

Major revision: the discussion section should talk about the obtained results, preferably in the exact order as they were presented in the results section. Some parts are more fit in the introduction section. The authors need to revise the Introduction and the Discussion sections and leave all the textbook information in the Introduction, focusing on the interpretation of the results in respect to the published literature, describing potential clinical significance, providing directions for further research.

6. References

Minor revision: all references have to be cited in accordance with the requirements.

7. Tables

Minor revision: the abbreviations need to be explained and the used statistical method should be mentioned. Tab. 3, 4, 5 Subgroup „NK activity“. Tab. 4 clarifies subgroups „length of the disease“.

8. Figures

Minor revision: abbreviations (e.g. CON) should not be used in the figure legends.

9. Writing

Minor revision: spell check and editing is advisable. First used abbreviations should be explained. Plagiarism was not detected.

10. Overall comment

The researchers investigated the effect of obstructive sleep apnea-hypopnea syndrome on the lymphocyte subpopulations and NK activity in children. I appreciate the extensive work which has been made. This study has a very good technical side, the researchers also obtained a lot of data to work with. Unfortunately, this study is poorly presented, the main research question is not clearly revealed, the methods section lacks consistency, the discussion section is incomplete, the novelty and the scientific gain of the study could be pointed out, there are also some minor issues. A score for the manuscript – 13, it needs major revision.

Thanks.

REFEREE: Associate Editor | **Revision** (0) 28 Jun 2020

Dear EIC,

The manuscript was reviewed by our reviewer. The reviewers have raised concerns regarding the manuscript, and therefore, the paper is not acceptable for publication in this format. However since the reviewer do find some merit in the paper, I would be willing to reconsider if they wish to undertake major revisions and re-submit, addressing the referees' concerns.

Please note that resubmitting your manuscript does not guarantee acceptance, and that your resubmission will be subject to a re-review before a decision is rendered.
Thanks.

REFEREE: EIC | **Revision** (0) 28 Jun 2020

Dear Author,
Thank you for submitting your manuscript to Iran J Pediatr. Your manuscript has now been reviewed by our reviewer and an Associate Editor. I now have the reports of the Referees, which suggest that your manuscript might be suitable for publication following a number of revisions. I attach some reviewer comments and invite you to submit a revised version of your manuscript addressing the points made.
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.

Reply to the reviewers' comments

Reviewer 1

Comments 1 *Title and Abstract*

Minor revision: the title is informative. The method for the lymphocyte subsets and NK activity should be mentioned. The conclusion should be clear and based on the obtained results (not the probability).

Reply: According to your suggestion, we have edited it in the revised manuscript.

Comments 2 *Introduction*

Minor revision: the research question, novelty, importance should be mentioned. The statement of this work's possibility to „provide a reference for clinical diagnosis and treatment" (p. 4) should be clarified.

Reply: According to your suggestion, we have edited it in the revised manuscript.

Comments 3 *Materials and methods*

Major revision: this section lacks consistency. It should be clearly stated which instrumental and laboratory tests were performed on both groups. The cellular testing procedure should be described consequentially: sample collection, cell suspension preparation, analysis, interpretation. The inclusion/exclusion criteria should state just the criteria, not the classification. Were there any children with autoimmune disorders, immune deficiencies? Is there any information about the frequency of the upper respiratory tract infections in both groups? The names of the exact laboratory tests should be mentioned (p. 5).

Reply: As requested clearly stated which instrumental and laboratory tests were performed on both groups. As requested consequentially describe the cellular testing procedure.

Comments 4 The used analyzer, manufacturer, country of origin should be stated in the parenthesis, while citing the performed laboratory tests. Identify the used antibodies: full name, manufacturer, catalogue No, Lot. No**.**

Reply: According to your suggestion, we have edited it in the revised manuscript.

Comments 5 The results are clearly stated.

Reply: Thanks for your positive comments on our work.

Comments 6 *Discussion*

Major revision: the discussion section should talk about the obtained results, preferably in the exact order as they were presented in the results section. Some parts are more fit to the introduction section. The authors need to revise the Introduction and the Discussion sections and leave all the textbook information in the Introduction, focusing on the interpretation of the results in respect to the published literature, describing potential clinical significance, providing directions for further research.

Reply: According to your suggestion, we have edited it in the revised manuscript.

Comments 7 *References*

Minor revision: all references have to be cited in accordance to the requirements.

Reply: We have checked all the references in the revised manuscript. Thanks.

Comments 8 *Tables*

Minor revision: the abbreviations need to be explained and the used statistical method should be mentioned. Tab. 3, 4, 5 Subgroup „NK activity“. Tab. 4 clarify subgroups „length of the disease“.

Reply: Thanks for your comments. According to your suggestion, we have edited it in the revised manuscript.

Comments 9 Figures

Minor revision: abbreviations (e.g. CON) should not be used in the figure legends.

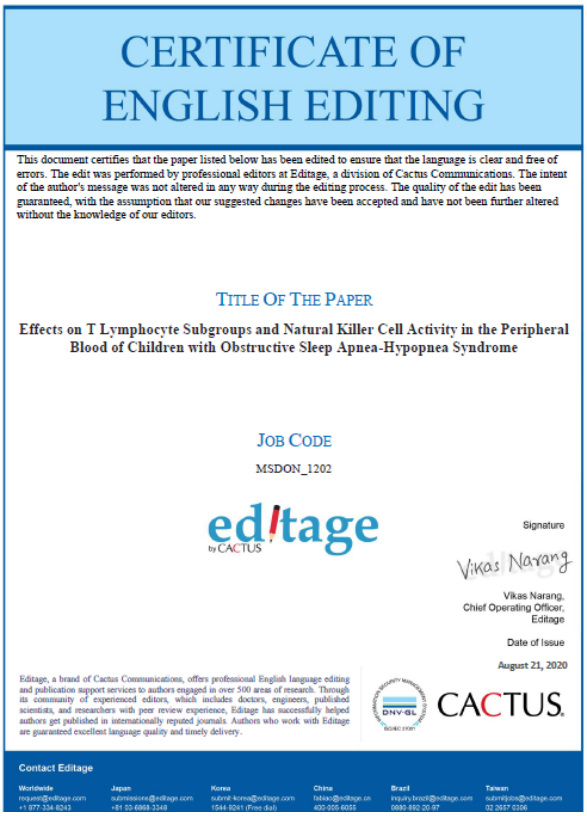
Reply: Thanks for your comments. According to your suggestion, we have edited it in the revised manuscript.

Comments 10 Writing

Minor revision: spell check and editing is advisable. First used abbreviations should be explained. Plagiarism was not detected.

Reply: According to your suggestion, we have edited the related content in the revised manuscript. The grammatical errors and mistakes in the manuscript and in the table have been corrected. The revised manuscript has been edited by a professional English editing company.

The certification of English editing:



CERTIFICATE OF ENGLISH EDITING

This document certifies that the paper listed below has been edited to ensure that the language is clear and free of errors. The edit was performed by professional editors at Editage, a division of Cactus Communications. The intent of the author's message was not altered in any way during the editing process. The quality of the edit has been guaranteed, with the assumption that our suggested changes have been accepted and have not been further altered without the knowledge of our editors.

TITLE OF THE PAPER

Effects on T Lymphocyte Subgroups and Natural Killer Cell Activity in the Peripheral Blood of Children with Obstructive Sleep Apnea-Hypopnea Syndrome

JOB CODE

MSDON_1202

editage by CACTUS

Signature

Vikas Narang

Vikas Narang, Chief Operating Officer, Editage

Date of Issue

August 21, 2020

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Comments 11 Overall comment

The researchers investigated the effect of the obstructive sleep apnea-hypopnea syndrome on the lymphocyte subpopulations and NK activity in children. I appreciate the extensive work which has been made. This study has a very good technical side, the researchers also obtained a lot of data to work with. Unfortunately, this study is poorly presented, the main research question is not clearly revealed, the methods section lacks consistency, the discussion section is incomplete, the novelty and the scientific gain of the study could be pointed out, there are also some minor issues. A score for the manuscript – 13, it needs major revision.

Reply: Thanks for your effort and positive comments on our work. According to the reviewer's comments, we have edited the related content in the revised manuscript. Thank you!

OPEN PEER REVIEW

Revision (1)

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

REFEREE: Reviewer | **Revision (1)** 12 Sep 2020

Dear AE,
There are some comments which should be addressed by the author:
1. Writing
Minor revision: the overall writing and spelling is improved, but some sentences are too long, very complex and hard to follow. Some times the writing style is too informal. Please critically reevaluate your sentences „(...) important organs (...)“, „ (...) the same flow cytometer in our laboratory“, „The flow cytometer focuses the shaped laser beam (...)“. The term „to objectively evaluate humoral immune function“ is not accurate, because peripheral blood lymphocyte subpopulations and NK activity were tested. The same goes with „The serum T lymphocyte subsets and NK cell activity levels were (...)“ You tested plasma, not serum.
2. Materials and methods
Minor revision: please include references for inclusion criteria and the severity of OSAHS.
3. Discussion
Minor revision: the discussion of the obtained results is incomplete. The researchers haven't answered the question to what extend the immune system is altered? What is the normal ratio of CD4/CD8? What threat does OSAHS, that is – an altered lymphocyte subtypes and NK activity pose to children? Are they more susceptible to certain diseases or certain pathogens? What are other works on the topic?
4. Summary
Why does the conclusion state, that “Once the diagnosis is clear, the disease should be treated according to age, duration since disease onset, and severity of the disease (…)” when the obtained results showed no difference in comparing the duration?
5. Figures
Minor revision: figure legends are uninformative.
Overall comment
The manuscript needs minor revision.
Thanks.

REFEREE: Associate Editor | **Revision (1)** 12 Sep 2020

Dear EIC,
The authors have addressed the majority of our reviewers' concerns. We have some comments which is in the attached file. Please consider these suggestions in revising the

paper.
Thanks.

REFEREE: EIC | **Revision (1)** 12 Sep 2020

Dear Author,
The second round of peer review of your manuscript is completed. I now have the reports of the Referees, which suggest that your manuscript needs some minor correction.
Thanks.

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.

Reply to the reviewers' comments

Reviewer 1

Comments 1 *Writing*
Minor revision: the overall writing and spelling is improved, but some sentences are too long, very complex and hard to follow. Some times the writing style is too informal. Please critically reevaluate your sentences „(...) important organs (...)", „ (...) the same flow cytometer in our laboratory", „The flow cytometer focuses the shaped laser beam (...)". The term „to objectively evaluate humoral immune function" is not accurate, because peripheral blood lymphocyte subpopulations and NK activity were tested. The same goes with „The serum T lymphocyte subsets and NK cell activity levels were (...)" You tested plasma, not serum.

Reply: Thanks for your comments. According to your suggestion, we have edited the related contents in the revised manuscript.

Comments 2 *Materials and methods*
Minor revision: please include references for inclusion criteria and the severity of OSAHS.

Reply: Thanks for your comments. According to your suggestion, we have added the related reference in the revised manuscript:

"13 Brietzke SE, Gallagher D. The effectiveness of tonsillectomy and adenoidectomy in the treatment of pediatric obstructive sleep apnea/hypopnea syndrome: a meta-analysis. Otolaryngol Head Neck Surg. 2006;134(6):979-84. "

Comments 3 *Discussion*
Minor revision: the discussion of the obtained results is incomplete. The researchers haven't answered the question to what extend the immune system is altered? What is the normal ratio of CD4/CD8? What threat does OSAHS, that is – an altered lymphocyte subtypes and NK activity pose to children? Are they more susceptible to certain diseases or certain pathogens? What are other works on the topic?

Reply: Thanks for your comments. According to your suggestion, we have edited the related contents in the revised manuscript: "Although there is no significant difference in the immune function of children with different courses of disease, as the disease gets worse, the immune function of these children is obviously affected."

Comments 4 *Summary*
Why does the conclusion state, that "Once the diagnosis is clear, the disease should be treated according to age, duration since disease onset, and severity of the disease (…)" when the obtained results showed no difference in comparing the duration?

Reply: According to your suggestion, we have edited the related content in the revised manuscript: "Therefore, once the diagnosis is clear, regardless of the length of the disease, the disease should be treated according to severity of the disease."

Comments 5 *Figures*
Minor revision: figure legends are uninformative.

Reply: Thanks for your comments. According to your suggestion, we have edited the related figure legends in the revised manuscript: "Figure 1. Analysis of T lymphocyte subsets and NK cell activity in peripheral blood of group CON (healthy children without related diseases and systemic diseases). A:CD45-FITC, B:CD3+%:69.5%, C:CD3+CD4+%:26.5%, D:CD3+CD8+%:33.7%, E:CD4/CD8Ratio:0.79, F:CD56+NK:9.7%. The test results of children with OSAHS suggest that the CD4/ CD8 ratio is obviously inverted.

Figure 2. Analysis of T lymphocyte subsets and NK cell activity in peripheral blood of group OSAHS (children with OSAHS). A:CD45-FITC, B:CD3+%:56.7%, C:CD3+CD4+%:34.9%, D:CD3+CD8+%:16.6%, E:CD4/CD8Ratio:2.1, F:CD56+NK:11.0%."

OPEN PEER REVIEW

Revision (2)

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

REFEREE: Reviewer | **Revision** (2) 6 Oct 2020

Dear AE,
The changes made in the manuscript are acceptable.
Thanks.

REFEREE: Associate Editor | **Revision** (2) 7 Oct 2020

Dear EIC,
As the authors improved their manuscript based on the reviewer's recommendations, I think it can be accepted.
Thanks.

REFEREE: EIC | **Revision** (2) 7 Oct 2020

Dear Author,
The second round of peer review of your manuscript has been completed, and I am pleased to inform you that your manuscript has now been accepted for publication in our journal.
Thanks.