OPEN PEER REVIEW

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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://brieflands.com/briefland/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Management of Childhood Rheumatic Diseases During the COVID-19 Pandemic: A Survey on Parental Approaches and Involvements in the Treatment Procedure"

Author(s): Fatemeh Tahghighi Sharabian, Vahid Ziaee

Review Timeline:

Submit Date:	22 Aug 2020
Revised Date:	10 Oct 2020
Accepted Date:	13 Nov 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) — 2 Sep 2020

Dear AE,
This study aimed to seek the approaches of parents in the medical management of their children with rheumatic disorders during the COVID-19 outbreak.
This cross-sectional study was conducted based on an online questionarie survey
In the conclusion: None of the parents who had visited a pediatric rheumatologist during this time had discontinued their children's medicines. Therefore, close contact with doctors or online consultation could benefit them during the COVID-19 era.
The manuscript is designed and written well.
Thanks

Cheng-Yi Wang: Reviewer | **Revision** (0) — 10 Sep 2020

Dear AE,
Chronic disease management is always a hot topic for pediatricians regardless of whether the COVID-19 pandemic. The author found this topic by a descriptive cross-sectional study,

but how to settle the matter was not described in detail (such as online consultation).
Thanks

REFEREE: Associate Editor | **Revision** (0) 25 Sep 2020

Dear EIC,
The manuscript is studied, and there are some comments which should be addressed by the author. According to the comments, the document needs major revision.
Kind regards,

REFEREE: EIC | **Revision** (0) 25 Sep 2020

Dear Authors,
Thank you for submitting your manuscript to Iran J Pediatr. Your manuscript has now been reviewed by two reviewers 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

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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.

Dear Dr. Ziaee

Editor in Chief,Dr Ziaee

We are very grateful to you and reviewers for the appropriate and constructive suggestions to improve the paper. We revised the manuscript according to reviewers' comments. In the following, comments were responded one-by-one. Please note that the specified changes/modifications of reviewers have been incorporated in the revised version of the manuscript as colored text. We have also attended to the formatting and language of the manuscript according to reviewers' suggestion.

We would be willing to make further changes if you felt them necessary and would be grateful for your advice on the matter.

Best regards

Corresponding author

Reviewer #1:

This study aimed to seek the approaches of parents in the medical management of their children with rheumatic disorders during the COVID-19 outbreak.

This cross-sectional study was conducted based on an online questionarie survey

In the conclusion: None of the parents who had visited a pediatric rheumatologist during this time had discontinued their children's medicines. Therefore, close contact with doctors or online consultation could benefit them during the COVID-19 era.

The manuscript is designed and written well.

Reviewer #2:

Chronic disease management is always a hot topic for pediatricians regardless of whether the COVID-19 pandemic. The author found this topic by a descriptive cross-sectional study, but how to settle the matter was not described in detail (such as online consultation).

Response: We were in close touch with the parents of children with rheumatic diseases through an online channel has been set up under the supervision of pediatric rheumatologists (faculty members of Tehran University of Medical Sciences) that aims to answer the questions of parents of children with rheumatic diseases. The links of this channel was provided to all parents with sick children so that they could have asked their questions and receive the necessary consultations as soon as possible.

This part was added to the manuscript text according to the reviewer's comment.

Associate Editor's Comments:

Your manuscript was reviewed by our reviewers. The reviewers have raised concerns regarding the manuscript, and therefore, your paper is not acceptable for publication in this format. However since the reviewers do find some merit in the paper, I would be willing to reconsider if you 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.

1- 3 first paragraphs of introduction and some studies to which you have cited in the introduction section are irrelevant to the objective of the study and its hypothesis.

Response: Thanks to the comment. We revised the mentioned part and provided some appropriate references.

2- Response rate should be mentioned in the result section.

Response: Thanks. The results section was revised. As mentioned in the results only 13 cases out of 129 cases (10.4%), thus the majority of the study population 116 cases (89.6%) responded to the consolations and continued their treatment. Accordingly the overall response rate in this study was obtained 89.6%. Moreover, among the symptomatic cases 19 out of 23 rheumatoid cases have continued to take their routine medications, and the response rate among this group

was obtained 82.6%. Of note, none of the parents who had visited a pediatric rheumatologist during this time had discontinued their children's medicines, means a response rate of 100%.

3- More information should be presented about 3 patients with COVID-19 including sign and symptoms, underlying disease and its stage, final outcome, and their medication for COVID-19.

Response: Thanks. We provided the detailed information of the COVID-19 positive cases in the text. Accordingly, these three cases tested positive for COVID-19 by PCR. Their clinical information was as follows:

CASE 1: A 12 years old girl, who has been diagnosed with dermatomyosite 3 years ago. Due to her mild condition and to control her disease, she was under treatment with prednisolone (5mg/daily), methotrexate (3.5 mg, 3 pills/week), hydroxychloroquine (100mg/daily), and folic acid (1 mg daily). The patient exhibited fever, and dry cough, thus received another doses of hydroxychloroquine and Azithromycin. Following the treatment for COVID-19, the patient's symptoms were resolved after 1 week. During this time, her preexisting condition treatment did not discontinue.

CASE 2: The patient was 11 years-old, who had been diagnosed with JIA 6 months ago. He received naproxen (250 mg, 2 pills/daily), methotrexate (3.5 mg, 3 pills/week) folic acid (1 mg daily) and Osteo Care sorbet for his condition. The patient had fever, myalgia and coughs with positive PCR for COVID-19. In addition to his pretexting treatment, he received hydroxychloroquine for 10 days. After 10 days, the symptoms were resolved and we stopped COVID-19 treatment.

CASE 3: The case was 13 years old girl, who was under treatment for 4 years and received prednisolone (5 mg/daily), methotrexate (15 mg vial/week), folic acid (1 mg daily) and calcium-D (daily) for her condition. The patient exhibited fever, tachypnea, myalgia and tested positive for COVID-19 by PCR. She received oral hydroxychloroquine and Azithromycin, while receiving her routine treatment. After 1 week of treatment her symptoms were resolved.

4- Discussion section should be improved by focus on adherence to treatment in seasonal and epidemic infection in chronic diseases.

Response: Thanks. The following section was added into the discussion:

During the epidemics and prevalence of seasonal infections, it is of considerable importance for patients with preexisting conditions to adhere to their routine treatments. However, due to the stressful situation, patients or their parents may refuse to continue their treatment which can threaten their physical and mental health conditions. Therefore, consultation with doctors during these tough periods could improve the health status of the patients.

5- The limitations and strength of this study should explain at the end of discussion.

Response: Thanks. The limitations and strengths of this study were added to the end of discussion as follows:

Limitations and strengths

One of the limitations of this study was that those patients resided in the suburban or deprived areas or those whom had not online accession were not be able to use these consultations, thus unfortunately were excluded from the study. Furthermore, the patients who had been involved in this research were of different rheumatic diseases categories, and further studies should be done on the patients with specific category to obtain more conclusive results. However, taken together, the findings of the present study could help decision makers and provide the basis for the future investigations.

6- Authors included all finding of this study in the result section of the abstract. Result section of the abstract should be summarized.

Response: Thanks, the abstract was revised and all the main findings of the study were included.

7- The last raw of table 2 (other drugs) could be omitted.

Response: Thanks, the Table 2 was revised according to the comment of editorial office.

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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: Reviewer | **Revision** (1) 6 Nov 2020

Dear AE,
The study is reviewed carefully. According to comments and revisions by the author, this manuscript is accepted.
Thanks

REFEREE: Associate Editor | **Revision** (1) 13 Nov 2020

Dear EIC,
The authors have modified the manuscript accordingly and have provided specific answers in an accurate manner. I suggest that this version is suitable for publication in the Iran J Pediatr.
Thanks

REFEREE: EIC | **Revision** (1) 13 Nov 2020

Dear Authors,
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