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.

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://brief.land/briefland/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Investigation of SARS-CoV-2 Ability to Pass Through the Placenta"

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Review Timeline:

Submit Date: 5 Oct 2020
Revised Date: 21 Nov 2020
Accepted Date: 14 Dec 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) 20 Oct 2020

Dear AE,
The interesting topic at present.
1- The meaning of the sentence on lines 109-110 is vague: " The activity does not change remarkably during pregnancy The activity of polymerase β during pregnancy."
2- The second paragraph under conclusion line 173 needs correction:
"Note that maternal comorbidities, including gestational diabetes, preeclampsia, and intrauterine fetal growth restrictions, may damage this barrier, which increases the risk of SARS-CoV-2 intrauterine transmission to the fetus. "
intrauterine fetal growth restrictions cannot be considered as a maternal comorbidity.
Thanks.

REFEREE: Reviewer | **Revision** (0) 26 Oct 2020

Dear AE,
- The authors must specify in the abstract that finally, how many articles have they

reviewed?
- In the article, they must explain clearly through which mechanisms, gestational diabetes, preeclampsia, and intrauterine fetal growth restrictions, may damage the placental barrier for SARS-CoV-2 intrauterine transmission to the fetus?
Thanks.

REFEREE: Associate Editor | **Revision** (0) 30 Oct 2020

Dear EIC,
Thank you for inviting me as the associate editor of the manuscript entitled "Investigation of SARS-CoV-2 ability to pass through the placenta". It was sent to a gynecologist and a reproductive health specialist. Both reviewers thought the manuscript could be published after a minor revision.
Kindest Regards

REFEREE: EIC | **Revision** (0) 8 Nov 2020

Dear Author,
Your article is reviewed by the reviewers carefully. According to their comments, this document needs minor 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.

Ms. No.: 110047

Title: Investigation of SARS-CoV-2 ability to pass through the placenta

Dear Professor Lankarani

Editor-in-Chief of Shiraz E-Medical Journal

The authors would like to thank the editor in chief and the reviewer for their valuable comments. The manuscript is revised according to the comments raised by the reviewer. The authors' answers and the changes in the manuscript are presented as follows.

Editor and Reviewer comments:

Reviewer #1:

Question 1: You must specify in the abstract that finally, how many articles have you reviewed?

Answer 1*:* Thank you so much for your comment. The authors determined the number of reviewed articles in abstract of revised manuscript.

In abstract, (part of Evidence Acquisition), in the present study, a search was done in domestic and international databases including Google Scholar, Web of Science, PubMed, and Scopus using specific keywords ("Coronavirus" OR "COVID19" OR "SARS-COV-2") AND ("Fetus" OR "Placenta") AND ("Pregnancy") limited until August 2020. Finally, we have reviewed 250 articles.

Question 2: In article you must explain clearly that through which mechanisms, gestational diabetes, preeclampsia, and intrauterine fetal growth restrictions, may damage placental barrier for SARS-CoV-2 intrauterine transmission to the fetus?

Answer 2*:* Thank you for your valuable comment. The authors have modified it at the revised manuscript as follows:

Intrauterine fetal growth restriction and maternal comorbidities, including gestational diabetes, preeclampsia may damage this barrier by several mechanisms such as abnormal cytotrophoblast differentiation, defective placental angiogenesis and placental ischemia, which increases the risk of SARS-CoV-2 intrauterine transmission to the fetus.

Reviewer #2:

Question 1: Interesting topic at present. The meaning of the sentence on lines 109-110 is vague: " The activity does not change remarkably during pregnancy The activity of polymerase β during pregnancy."

Answer 1*:* Thank you so much for your comment. It is corrected as follows:

The polymerase β activity do not change significantly during pregnancy.

Question 2: The second paragraph under conclusion line 173 needs correction:

"Note that maternal comorbidities, including gestational diabetes, preeclampsia, and intrauterine fetal growth restrictions, may damage this barrier, which increases the risk of SARS-CoV-2 intrauterine transmission to the fetus. "

intrauterine fetal growth restrictions cannot be considered as a maternal comorbidity.

Answer 2*:* Thank you for your valuable comment. The authors have modified it at the revised manuscript as follows:

Intrauterine fetal growth restriction and maternal comorbidities, including gestational diabetes, preeclampsia may damage this barrier by several mechanisms such as abnormal cytotrophoblast differentiation, defective placental angiogenesis and placental ischemia, which increases the risk of SARS-CoV-2 intrauterine transmission to the fetus.

Best Regards

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) — 7 Dec 2020

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

REFEREE: Reviewer | **Revision** (1) — 12 Dec 2020

Dear AE,
The desired changes have been applied and are approved
Thanks.

Najmeh Maharlouei: Associate Editor | **Revision** (1) — 14 Dec 2020

Dear EIC
Based on the authors' answers to the reviewers' comments, the reviewer(s) have recommended publication.
Kind regards.

REFEREE: EIC | **Revision** (1) — 14 Dec 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.