

Review Form 1.6

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_84058
Title of the Manuscript:	The effect of levofloxacin combinations on CRP decrease in SARS CoV-2 pneumonia
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>The basis of empirical therapy used is lacking in references. The combination used is not based on the possibility of secondary infection occurring in the patient. Confounding factors in CRP reduction have not been well controlled. The severity of COVID 19 is not assessed. The research design is not clear. The reasons for the use of combination antibiotics have not been previously explained.</p>	<p>The study was done as a purely retrospective file review. Prophylactic or empirical antibiotic administration of levofloxacin recommended by the World Health Organization is recommended. However, it was understood that physicians preferred multiple antibiotics due to their uneasiness in Covid 19, which is a serious disease, especially by looking at the CRP and lung tomography images. For this reason, it was aimed in the study whether the effects on CRP differ with other variables.</p> <p>I totally agree, the antibiotics used are not preferred against secondary infection. I am a physician who is personally against the use of antibiotics in this way. However, it was determined that the reason why antibiotics were preferred in this way by physicians during the Covid pandemic process was because of the frightening images in CRP and tomography.</p> <p>In the study, parameters that will affect CRP were determined. For example, those who used anti-inflammatory drugs and those who received treatments such as steroid tocilizumab were of course evaluated separately as they were dependent variables. CRP comparison groups are completely homogeneous.</p> <p>I partially agree, the severity of Covid 19 cannot be evaluated only with CRP. It requires a multidisciplinary multifactorial approach. Variables such as comorbidities and age are important. However, the independent variables did not have statistical significance. It is observed in the literature and by observing that the severity of the disease, for example, the presence of diffuse pulmonary interstitial involvement, progresses more severely.</p> <p>The research design was reviewed and revised. It was seen that multiple antibiotics were preferred due to the purpose of the design, especially since it was a frightening disease at the beginning of the covid 19 pandemic. Why did physicians prefer multiple antibiotics? It was understood that high CRP and lungs were more concerned with radiologically frightening images. For this reason, it was aimed to investigate how CRP, which is a measurement parameter, changes. In general, it was understood that no combination was superior to the other.</p> <p>In this retrospective study, it was not clear why such combinations were preferred in the first place. As a result of the research, it was determined that even if the WBC value was normal, they preferred multiple antibiotics by paying more attention to the CRP and radiological images. In my opinion, it is unnecessary use of antibiotics. In this study, it was proved that these antibiotics did not differ significantly on the parameters examined.</p>

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Minor REVISION comments	<p>Grammar writing to be improved. The research objectives are not clear. There is no match between the goals and conclusions. The relationship between CRP and antibiotic administration was not previously described. Comorbid factors in the patient were not assessed. The writing of SARS CoV-2 pneumonia is not a standard term.</p>	<p>Grammatically re-evaluated and updated.</p> <p>Research objectives are clear. This part is detailed in the article.</p> <p>Objectives: Comparison of antibiotics prescribed by physicians according to CRP elevation even if WBC is normal Results: There was no significant difference in the effects of the combinations on CRP. So unnecessary antibiotics may have been used?</p> <p>In my opinion, if the WBC is normal, the CRP value alone does not matter in antibiotic preference (in general, this is the case). In this retrospective study, physicians focused more on this value and the results were investigated.</p> <p>The comorbid factors in the study were updated in detail.</p> <p>The term SARS-CoV-2 pneumonia was used deliberately. Because all of the patients in the period covered by the study were proven to have the SARS-CoV-2 virus, and there was no variation, mutation of this virus at that time. Antibiotics were completely preferred in pneumonia caused by the SARS-CoV-2 virus (if there were mutant ones, the term Covid 19 pneumonia would be used, but mutants are not present in this study)</p>
Optional/General comments	<p>Interactions between antibiotic combinations were not assessed.</p>	<p>It is not possible to detect interactions between antibiotic combinations in this study. Because it is a retrospective study. However, it can be detected by looking specifically at the relevant parameters in a prospective case-control / observational study. A special parameter and a special examination could not be performed in this study (retrospective cases 1,5 years ago)</p>

PART 2:

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Are there ethical issues in this manuscript?	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	<p>Ethical approvals are available for the article, there is no ethical problem</p>