

Peer Review File

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Reviewer comments

Reviewer A

Dear Authors,

Thank you for your contribution. I recommend following suggestions to reconsider your manuscript. Please answer pointwise and incorporate all the changes, discussion, and suggested references in suitable places for us to be clear about the revised/edited manuscript. Thank you for your contribution.

Case presentation

Comment 1: Line 54: ? Why he received dexamethasone before, any idea?

Reply 1: Early during the COVID-19 outbreak many physicians in Mexico (mostly on the primary care setting) started prescribing steroids even in mild cases of SARS COV-2 infection, despite the lack of solid scientific evidence supporting benefits among these patients. That is a phenomenon that certainly still occurs in some parts of our country. Sadly, we could not reach the primary care physician that prescribed the medication on the first place.

Change in the text: None He received treatment with azithromycin and dexamethasone every 24 hours during five days as an outpatient treatment

Comment 2: Line 84 What is fraxiparine? LMWH- is that the brand used, please check if that is the case, only use the molecule name.

Reply 2: Yes, we talk about LMWH (Fraxiparine is a commercial brand in Mexico)
We apologize

Change in the text: low molecular weight heparine.

Comment 3: Ny smoking history

Reply 3: He denied any smoking history.

Change in the text: He denied any smoking history alcohol or drug usage.

Comment 4: What treatment given remdesivir or just steroids?

Reply 4: Just steroids. Unfortunately, remdesivir was not available at that moment in our hospital due to issues related with chain supply.

Change in the text: Unfortunately, remdesivir was not available at the moment in our hospital due to issues related with chain supply.

Discussion

Line 91. Rarely pneumopericardium have also been reported. Please add the same with reference as well. Refer to the paper. (PMID: 32861883, PMID: 33367679)

Change in text: Rarely pneumopericardium have also been reported.

Images

Please mark the site of emphysema with arrows.

Change made.

Reviewer B

The case described is an interesting one. Pneumomediastinum or spontaneous mediastinal emphysema has been increasingly described in COVID-19 patients receiving non invasive ventilation. The patient had a good outcome even though ME is usually associated with a poor prognosis. It is unclear why this patient developed ME in spite of having mild disease (based on CRP). Unfortunately, there is nothing novel to be learnt from the case. Also, it is unclear what "severe cough access situation" means in line 109.

Reply: Thank you for all your kind observations,

Currently many patients with COVID-19 associated pneumonia develop ME. The majority of these patients are treated with any sort of ventilation support (ej. Non-invasive – invasive mechanical ventilation.) Nonetheless, this patient spontaneously developed the complication. We presented the case at a multidisciplinary academic session in our institution which raised increasing interest on the topic and provoked interesting conversation among our residents and staff from the academic stand point. That response made us consider sending the case for publication.

Changes in the text: Another predisposing factor inducing increased airway pressures in these patients is the presence of pronounced cough that generates a Macklin-like effect.