



SDI Review Form 1.6

Journal Name:	International Journal of TROPICAL DISEASE & Health
Manuscript Number:	Ms_IJTDH_22992
Title of the Manuscript:	Unilateral mediothoracic exanthem – Report of the third patient in the literature
Type of the Article	Case studies

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:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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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	According the disease history, virus was speculated as the causes. It may be right. Had It be proved as to the the first and second cases? About the virus aetiology, what you have done about the first case, the second case and the third case. These should be illustrated. Because I still suspected the diagnosis "herpes zoster".	We entirely agree to these comments We therefore inserted "Laboratory-based investigations also did not pinpoint a definite virus for our report on the first two patients with UME.⁷ UME might, like pityriasis rosea, Gianotti-Crosti syndrome, asymmetric perilesional exanthem, papular-purpuric gloves and socks syndrome, eruptive pseudoangiomatosis, and eruption hypomelanosis, be a group of diseases known as paraviral eruptions,^{9,10} meaning the one single definite virological cause has not been firmly established for these exanthems." (lines 79-84). We also inserted References 9 and 10. We believe that the diagnosis was not herpes zoster, but fully understand this concern of the reviewer. We therefore revised the follows to address this issue: "The rash jumped across dermatomes from T4/T5 laterally to T6 medially, stopped abruptly at the midline, faded at the lateral aspect of his thoracic cage, and became unrecognizable on the back (Fig. 1a and 1b). Vesicles were not noted for the entire course of the eruption." (lines 35-39)



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<u>Minor</u> REVISION comments	If something new about this kind cases such as aetiology was not be found, we had better await for or more data or cases.	We entirely agree with the reviewer. We should wait for more data or patients with this eruption.
<u>Optional/General</u> comments		