

Endothelial molecule levels (VCAM-1, ICAM-1) in uncomplicated malaria cases in Lagos, Nigeria.

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Author's Response Chat

Thank you so much for the comprehensive review, the following comments were addressed;

S/N	Reviewer's Comments	Author's Response
1	As of today, our journal adheres to the CRediT declarations, so we ask you to please provide us with this declaration.	Lines 35-37: Author Contribution Statement has been rephrased following the journal specification
	Reviewer B:	
1	Summary: Clarity in the conclusion: In the final sentence, the conclusion about the relationship between ICAM-1, VCAM-1, and PCV levels in malaria is not completely clear. You could better emphasize the key finding by pointing out its clinical or biological implication more forcefully.	Summary: Thank for detailed review, the conclusion- Lines 57-59 has been rephrased
3a	There are several references that need to be unified in format. Be sure to use a consistent numbering format and, preferably, follow the guidelines of the journal to which you will submit the manuscript.	References in the introduction: the numbering of the references has been harmonized
3b	Connection to the study: The introduction discusses endothelial markers in severe malaria, but your study focuses on uncomplicated malaria. It would be helpful to highlight why this	The comments are well taken, the introduction - lines 88 -99 rewritten highlighting why study on uncomplicated malaria is important.

	focus on uncomplicated malaria is novel or important.	
4	<p>Review of geographical data: The inclusion of clinic coordinates is very detailed, but could perhaps be simplified to improve the flow of the text, unless this is an explicit requirement of the journal.</p> <p>ELISA technique development: The description is clear, but it would be useful to add information on the coefficient of variation of the measurements to validate the reproducibility of the assay.</p> <p>Justification of controls: The justification of the controls used in the study can be enriched by explaining why afebrile individuals were selected and why individuals with severe malaria were not included.</p>	<p>The coordinates have been expunged as recommended (Lines 116 -117).</p> <p>Information on the coefficient of variation is not necessary for this report</p> <p>Justification on the selection of controls; will help minimize potential confounding factors, and enhance the validity of the findings (Lines 128 - 131).</p>
5	Ethical aspects.	Good
6	<p>Results:</p> <p>Interpretation of correlations: Although you mention the non-significant correlations between parasitemia and ICAM-1 and VCAM-1 levels, could you briefly discuss why this might be the case. Could the lack of correlation be due to factors such as heterogeneity of parasitemia level in deep tissues?</p> <p>Dispersion data: In Figures 3 and 4, it seems that the dispersion of the data is not discussed enough. Could you explain if this variability has</p>	<p>We appreciate your review; it has added more value to our report; The interpretation of the non-significant correlations between parasitemia and ICAM-1 and VCAM-1 levels has been discussed (Lines 231 – 240).</p> <p>Dispersion data has been discussed (Lines 231 -240)</p>

	<p>any biological significance, such as individual differences in immune response.</p> <p>Clarity on PCV analysis: The analysis on the relationship between ICAM-1, VCAM-1 and PCV levels is well presented, but could you expand more on the clinical implication of this observation. Could these markers be used as an early index of anemia risk in mild malaria infections?</p>	<p>The relationship between ICAM-1, VCAM-1 and PCV levels has been described (Lines 241 – 255)</p>
7	<p>Discussion: Elaborate on why ICAM-1 and VCAM-1 do not correlate with parasite density in your study, while others have found similar associations. Implications for clinical practice: could you expand on how ICAM-1 and VCAM-1 monitoring could be integrated into clinical practice.</p> <p>Limitations section: The limitation about not measuring ICAM-1 and VCAM-1 in severe malaria is not relevant, because it is outside the scope of the study, other limitations should be included, such as geographic variability and the possible influence of coinfections on the levels of these markers.</p>	<p>Discussion has been revised for more clarity (Lines 221 - 280)</p> <p>Limitation of the study have been revised as seen in Lines 281 -283</p>