Review of: "A brief overview on COVID-19 and its comparison with SARS, MERS, and H1N1"

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Potential competing interests: No potential competing interests to declare.

In the section on “clinical features”, most of the data cited in this manucript appears to be outdated, referencing publications primarily from early 2020, during the initial global outbreak of COVID-19. While these sources may have been crucial at that time, the disease has since infected billions worldwide, and a much broader range of clinical features have been identified.

In the section on 'Epidemiological parameters', the author cited several sources to describe the basic reproduction number (R0) of COVID-19. However, as it is widely known, the emergence of variants such as Omicron has significantly altered the R0. Therefore, discussing the overall R0 of COVID-19 without addressing these changes seems to lack context and value.

Similarly, extensive research over the past three years has confirmed the role of ACE2 receptors in SARS-CoV-2 infection and has provided substantial insights into the 'mechanism of action of 2019-nCoV'.

Regarding the diagnosis of COVID-19, methods such as nucleic acid testing, antigen testing, and even sequencing the viral genome to determine its variant have been widely adopted worldwide over the past three years.

Additionally, the use of '2019-nCoV' as a term is outdated; 'SARS-CoV-2' is now widely accepted and more professional. Besides, in several parts of the manuscript, the author cites as many as ten references at a time, which seems inappropriate.

Finally, the author's conclusion that “SARS-CoV-2 is more likely to cause a pandemic than MERS, H1N1, and SARS” is already a self-evident fact now, hence offering limited value to current research.

In summary, given that most references in this review are dated to before 2020 and there have been countless in-depth studies since then, the value of this review appears to be limited. The paper would benefit greatly from an updated analysis using recent findings.