

# Review of: "Risk Factors Associated with Development and Persistence of Long COVID: A Cross-Sectional Study"

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**Potential competing interests:** The author(s) declared that no potential competing interests exist.

The authors submit a questionnaire to recovered COVID-19 patients who go to the hospital for evaluation as convalescent plasma donors. In this questionnaire, they ask, in a closed way, about certain symptoms the subjects may have. Also, about whether these symptoms are present from the beginning of the infection or appeared after the infection was cured.

The questionnaire has excess and default problems. On the one hand, it would have been better to speak of "disease" rather than of "infection" and clearly define what is meant by "end of infection". The questionnaire leaves too many things open, in the air, and it is difficult to evaluate. This makes many responses difficult to analyze. Some because they seem too technical to be evaluated by patients, such as having received antivirals or steroids, others because their definition is vague, such as hair loss. Although some patients report a certain transient loss of hair (something on the other hand frequent in viral infections such as HIV infection), I have not seen any patient go bald after COVID-19.

On the other hand, since it is a closed questionnaire, the authors are not able to analyze spontaneous symptoms that they have not pre-designed and here they may also have lost information.

It is a bit contradictory to say that it is a study on long COVID in patients after COVID-19 recovery, the expression long COVID seems to indicate that it is a disease that has never been cured, and yet the authors include only "after COVID-19 recovery patients". Perhaps it would be clearer to speak of post-acute COVID-19 after acute COVID-19 recovery.

Probably in the hospital there should be some predefined requirements to be considered a potential plasma donor (age, general condition or previous illnesses, among others). These requirements determine the study population in this article and the authors should have included them in the information they present.

The conclusion is out of focus, the main message is not that low BMI is associated with dysosmia and other such associations, this is irrelevant. The main message is that after one year only 9% of patients present

some symptom and that the prevalence of all symptoms decreases very sharply over the months.

#### Minor issues

The article has 16 authors, of which 15 have the same affiliation. I think it is not necessary to repeat it 15 times. Fifteen times it is said to be a National Center, but the nation is not specified in any. It would be convenient to know that national to which nation it refers.

The first sentence of the abstract: "Long coronavirus disease (COVID) has been a social concern" is a very vague and speculative comment.

Although it is explained in the text, in the abstract the expression that patients "who visited the National Center ..." were included seems odd. I think it would be better to say that potential convalescent plasma donors were included.

In the discussion, authors should avoid clichés and platitudes such as "Further research is needed", "avoiding SARS-CoV-2 infection is important to prevent long COVID", "Longitudinal follow-up surveys are needed to better understand the natural history of long COVID "or" Long-term observation is needed to better understand the duration of long COVID "

The data available on Post-acute COVID in vaccinated patients is still very limited and the authors should temper their comments on the matter.

We would recommend the publication of the article as long as the authors give a good answer to all the observations.