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Comments about the "Systematic Review: Physical Rehabilitation Therapy for Long COVID-19 Patient with Respiratory Sequelae"

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Abstract

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I read with great interest the systematic review of Prabawa et al. "Physical Rehabilitation Therapy for Long COVID-19 Patient with Respiratory Sequelae: A Systematic Review". The rational of this systematic review is very interesting, since it discusses the rehabilitation therapy for long coronavirus disease 2019 (COVID-19) syndrome with respiratory sequelae. In COVID-19, physical rehabilitation is a new management axis, and studies related to its impacts on COVID-19 patients' data are scarce. In their paper, Prabawa et al. have included one Tunisian study (Benzarti W, et al. General practitioners should provide the cardiorespiratory rehabilitation' minimum advice' for long COVID-19 patients. Lib J Med. 2022;17(1):2009101) published by the authors of this correspondence. However, three remarks related to the following points were noted: i) Citation of a wrong country of Benzarti et al., ii) Publishing a figure belonging to Benzarti et al. without obtaining the authors' permission, and iii) Omission to develop a chapter for nutrition rehabilitation. The present Letter to Editor is an appeal for a more rigor when reporting data from previous publications (eg; avoid mistakes related to the country of the first author), and is a remain that permission is needed if some authors want to use a figure created by somebody else.

Dear Editor,

"Physical Rehabilitation Therapy for Long COVID-19 Patient with Respiratory Sequelae: A Systematic Review" [1]. The rational of the systematic review is very interesting, since it discusses the rehabilitation therapy for long coronavirus disease 2019 (COVID-19) syndrome with respiratory sequelae [1]. In COVID-19, physical rehabilitation is a new management axis, and studies related to its impacts on COVID-19 patients' data are scarce [2], [3], [4], [5], [6], [7], [8], [9], [10], [11], [12]. Three previous systematic reviews including almost 35 studies demonstrated the feasibility and efficiency of physical rehabilitation in the management of post-COVID19 patients [12], [13], [14]. In their paper, Prabawa et al. [1] have included one study [10] published by the authors of this correspondence. However, three remarks are noted.

First, in one of their tables (i.e.; Table 1), Prabawa *et al.* [1] mentioned that "Benzarti *et al.*, 2022, Libya" is from Libya. In reality, Benzarti Wafa

is from Tunisia, however, the study identified [10] in the systematic review [1] was published in the Libyan Journal of Medicine.

Second, Prabawa et al. [1] have published a figure (i.e.; their Figure 3) that belongs to Benzarti et al. [10]. However, Prabawa et al. [1] omitted to ask for permission. This is considered as a "major" medical writing misconduct [15]. According to the 2022 International Committee of Medical Journal Editors (ICMJE) [15], if some authors used data from another published source, they must obtain permission. Moreover, if a figure has been published previously (which was the case of the aforementioned Figure 3), the authors must submit written permission from the copyright holder to reproduce it (which was not the case in the study of Prabawa et al.) [1]. According to the ICMJE [15], permission is required irrespective of authorship or publisher except for documents in the public domain.

Third, Prabawa et al. [1] omitted to highlight the advices related to the nutritional rehabilitation, which is always linked to physical rehabilitation F - Review Articles Letter to the Editor

therapy [11]. On the one hand, among the long-term COVID-19' clinical manifestations, the alteration of the nutritional status, such as weight loss (12%), was reported [16]. On the other hand, to enhance the immune system, long-term COVID-19' patients should restore muscle strength and provide the body with the essential nutrients [11], [12], [13], [14], [15], [16], [17]. Some professionals from "Hospital for Special Surgery" published a guide for nutritional rehabilitation [17]. A summary of the ten nutrition tips that should be communicated to "long-term COVID-19" patients were detailed in a previous paper [11].

To conclude, more rigor is needed when reporting data from previous publications (e.g.; country of the first author), and permission is needed if authors want to use a figure created by somebody else [18].

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