

The outcome of COVID-19 in patients with hematological malignancy

Dear Editor,

We would like to express our sincere thanks to the author's interest in our paper, and we are also grateful for her to add her invaluable contribution to improving the value of our paper.

We aimed to demonstrate the high vulnerability of patients with hematological malignancies in a large scale, randomized study. Our study revealed that there is an increased risk of COVID-19-related serious events (intensive care unit admission, the requirement for mechanical ventilation, or death) in patients with hematological malignancy compared with COVID-19 patients without cancer and supported the high vulnerability of patients with hematological malignancy in the current pandemic.¹ The author stated the lack of data about the use of azithromycin treatment in tab. 1.² The use of the azithromycin data was only available for the deceased patients and was not available for all of the study cohorts. If we had all data, we would have stated in tab. 1 and analyzed to show whether there was a relation between azithromycin use and survival. Furthermore, in tab. 4, we have inadvertently written the *p* value as .4, and this should be .04.

Finally, the author also stated her wishes for the requirement of new studies to detect new development to increase the survival rates for hematological malignancies. Our study revealed the outcome of COVID-19 patients with hematological malignancies during this pandemic. Providing any evidence on how to improve the survival of COVID-19 patients with hematological malignancies was beyond the scope of our study. We agree with the author that further studies and preventive measures to decrease the mortality rates are crucial for this issue; we are also eagerly waiting for such clinical trials to be finalized in the future. The optimal treatment approaches for COVID-19 have still been investigated by researchers worldwide.

CONFLICT OF INTERESTS

The authors declare that there are no conflict of interests.

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