Answering Reviewers:

The editorial comments on the article by Dr Desal et al, highlight the main finding of heightened in-hospital mortality in patients with COVID-19 infection and recurrent stroke. These comments point to the important finding of the article.

The factors that affect the heightened in-hospital mortality of patients with COVID-19 infection and recurrent ischemic stroke were

1. COVID-19 infection induces a hypercoagulable state and increases the risk of thrombotic events resulting in recurrent stroke.

   Ans: This comment is a part of text and is highlighted in yellow.

2. COVID-19 triggers a robust inflammatory response, often referred to as a cytokine storm, which may heighten endothelial dysfunction and exacerbate pre-existing cerebrovascular conditions.

   Ans: This comment is a part of text and is highlighted in yellow.

3. SARS-CoV-2 enters the CNS and results in subsequent damage.

   Ans: This comment is a part of text and is highlighted in yellow.

4. The other causes related to the high mortality in patients with COVID-19 infection were male, middle-age population and ethnic minorities.

   Ans: This comment is a part of text and is highlighted in yellow.

5. Delay treatment. COVID-19 infection may delay the diagnosis of stroke especially recurrent stroke. Time is brain, early diagnosis and treatment for stroke is important to the outcome of stroke patients. Delay diagnosis and treatment may increase risk of in-hospital mortality. The comments point out the clinical implications for managing recurrent stroke patients during and beyond the COVID-19 pandemic.

   Ans: This comment is addressed in text and is highlighted in yellow.

The strategy includes 1. Enhance risk stratification. Higher mortality risk in stroke patients with COVID-19, especially in middle-aged individuals, males, and ethnic minorities, prioritize rigorous monitoring and management of these high-risk groups is necessary.

Ans: This comment is a part of text and is highlighted in yellow.

2. Target intervention. Besides treating stroke, it also addresses the COVID-19-specific complications, such as hypercoaguability and systemic inflammation.

Ans: This comment is a part of text and is highlighted in yellow.

3. Multidisciplinary approach. Team-based approach include a neurologist and infectious disease specialist, which can ensure comprehensive care.

Ans: This comment is a part of text and is highlighted in yellow.

4. Improve preventive measures. Vaccination against COVID-19 and adherence to stroke prevention protocol is important.

Ans: This comment is a part of text and is highlighted in yellow.

5. Access to healthcare. Addressing the disparities in health access is important. The healthcare system should effort to ensure equitable access to health care.

Ans: This comment is a part of text and is highlighted in yellow.

The comments are written and point out the main finding of the article. I have no other comments.