Autoimmune thrombocytopenia (ITP) is classified in primary and secondary forms. The former form is characterized by an isolated thrombocytopenia without any association with other diseases. In contrast, the secondary form occurs in association with underlying diseases, i.e. infections, autoimmune diseases, and lymphoma. A successful treatment of the causative underlying disease usually results in an improvement or recovery of ITP. I think, these cases worth reporting.

The authors describe two patients with secondary ITP. Both patients seem to have SLE/Sjögren Syndrome, which may successfully be treated with hydroxychloroquine, and presumably with high-dose vitamin D alone. Ultimately, vitamin D is involved in wide variety of biological processes including bone
metabolism, immune system and cell proliferation and differentiation. Thus, I do not wonder whether both drugs may have a synergetic effect. It is highly interesting to know whether the authors have also tried to treat patients with primary ITP.

**Quality of written English:** Acceptable

**Declaration of competing interests:**

I declare that I have no competing interests.