

Drs. Wang and Shieh reply

To the Editor:

We appreciate the opinions shown in the letter from Liang, *et al*¹. First, in the methods, we wrote “patients with previous cancer or other specific autoimmune disease...that might influence the risk of NHL were excluded”². Therefore, we excluded not only patients with other specific autoimmune diseases diagnosed before the index date but also those patients diagnosed during the study period. The concerns of concomitant autoimmune diseases raised by the authors of the correspondence should therefore not be a problem based on our study design.

Second, patients with a catastrophic illness certificate (CIC) in Taiwan are exempt from copayments for medical treatment². In our experience, once a patient is diagnosed as having a certain catastrophic illness, the attending physician will help the patient to apply for a CIC immediately to be exempt from the monetary burden². Although it is certainly possible that some patients with primary Sjögren syndrome (pSS) may delay the application of CIC for prolonged periods of time, the cases should be rare given the financial benefits from the CIC status.

We do agree that treatments may be a possible reason for the bidirectional relationship between pSS and non-Hodgkin lymphoma. We did raise this issue in the Discussion section of our article². It will be worthwhile to further address this question in future studies.

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2. Wang LH, Wang WM, Lin CY, Lin SH, Shieh CC. Bidirectional relationship between primary Sjögren syndrome and non-Hodgkin lymphoma: a nationwide population-based study. *J Rheumatol* 2020;47:1374-8.