

PEER-REVIEW REPORT

Name of journal: World Journal of Orthopedics

Manuscript NO: 56381

Title: Screening for scoliosis. New recommendations, old dilemmas, no straight solutions

Reviewer's code: 00735715

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: India

Author's Country/Territory: Poland

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2020-04-28 02:27

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Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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SPECIFIC COMMENTS TO AUTHORS

Title, Abstract, and references; Abstract is well written and representative of the article. References are cited properly and included recent and relevant ones. Manuscript; The authors have depicted the available screening programs and their pros and cons. The reasons for withdrawal of recommendations by various countries. The disadvantages present screening system as it is school based, it doesn't take care the rights of children, it is not centered either the person or population concerned. And the importance of shared decision making. Explained regarding problems of people centered programs in children perspective. Again highlighting the issues associated with present methods like the definition of scoliosis is curvature more than 10 degree and treatment is only required for those curves over 25 degrees. Again only a small percentage will require treatment because a small percentage of children shows progression of scoliosis to that level. But there are some point needs to be addressed by the authors. So many facts are repeated throughout the article this may cause some disturbances to readers. There appears to be a disparity in your objectives in the abstract (Therefore we present one more crucial, but underrepresented in the discussion, issue of understanding and implementation of the contemporary principles of person-centred care, standards of preventive screening, and guideline development, in the context of screening for scoliosis.), and in the introduction (In this opinion review we will discuss the prevailing question whether "to screen or not to screen for adolescent idiopathic scoliosis). In the conclusion you have not given any opinion regarding whether to or not to do screening test for scoliosis. What is your guidelines for newer person centred screening for AIS. According to your article, The "Unique Needs of the Adolescents" statement promotes the Patient-Centred Medical Homes. Bright Future guidelines recommend spine examination during individual Adolescent Periodic Health Visits. From this



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description it is not clear if screening should be done during periodic health visit by adolescent. What about the adolescents in areas where health visits are not mandatory? Again in the concluding paragraph you have mention that the aim of your review is paper is to highlight the issue of screening understood as a preventive programme, rather than as a test. You have to correct these discrepancies. Any way it was a nice article which give an insight to the flows in the present screening for scoliosis. And how to develop a person cantered screening tool based on evidence base medicine. Regards.