

Dear Reviewers/editors,

Thank you very much for reviewing and commenting on our manuscript. We have revised it and made the following corrections according to your remarks:

1. In the introduction section: Some decent and detail writing about the significance and importance to investigate congenital pseudarthrosis of the tibia and distraction osteogenesis and bone regeneration, is needed.	Our study describes the technique to improve bone regeneration and union by combination of the methods. We added some points to the introduction but mainly discuss the importance of bone regeneration improvement and CPT management in the discussion section.
2. In Figure 1, comparing the results after the 6-month outcome with the previous results may not be intuitive enough, it is recommended to enlarge the related details. Making enlarged views of the details is recommended. 3 The same problem exists Figure 2. (See 5 for suggestions)	We have added more details to the description of figures. Other details of the cases in the figures are also presented in the tables (PTD-case 4 and CPT-case 3).
4. Since you mentioned that the integrated method is still of shortcomings, how can this situation be improved in the future? Can other methods be introduced and combined with this method to synergistically improve it?	Of course, there are ways to investigate the adjuncts to our protocol such as grafting at the docking site and intramedullary nailing. We pointed their possible use now in the revised discussion. Unfortunately, there are only few reports on the similar combination of the techniques and conclusions cannot be drawn yet .
5 Are the combined methods (Ilizarov bone transport and Masquelet technique) only used in the areas you proposed? Is it possible for treating other tissues with this or similar methods?	The combination of the techniques was used for infected cases and we cite that study in the revised version (reference 21). The method of distraction histogenesis is used to create a surplus of skin tissue. Also in atherosclerosis of the arteries of the lower extremities in order to create collateral blood flow. The Masquelet technique is applied for the purpose of creating a “vascularized fibrous tissue sheath,” but its application outside of bone surgery is not known.
6. Others: Several grammatical errors still exist in the paper (such as complex long sentences). Necessary polishing is required	Language polishing was done. Long and unnecessary statements were removed.
7. References	References were corrected as according to the comments of the scientific editor (not more than 3 citations from one journal). But, 4 references to the studies in the journal <i>Orthop Traumatol Surg Res</i> were left, as they are important.
8. Study design	We agree to the comments that our study design is a case series as the groups are of different etiology and cannot be compared.

Sincerely,

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corresponding author

