

## Documenting Changes Done in Revision

Dear Editor, Dear reviewer,

Thanks for the valuable Editorial team and reviewer comments on our manuscript: **Manuscript NO.:** 67542, entitled: “Safety and efficacy of surgical hip dislocation in managing femoral head fractures: A systematic review and meta-analysis.” we tried to address all the comments as much possible. We hope that we have answered all the queries raised by the reviewers. Any changes or addition to the manuscript are highlighted. We tried to report the number of lines where correction was added as possible. Some language editing and polishing were performed.

For the current study we have to report the strengths and weakness points. We believe that the most important strength point of the current systematic review is being the first to report on the usefulness and outcomes of using surgical hip dislocation for management of femoral head fractures, we had to admit that our study had some weak points such as the linguistic mistakes, lacking the direct comparison with other approaches such as the anterior and the posterior approaches, and last but not least we did not find out the learning curve or the number of case at which we could recommend the surgeon to go safely using this approach.

### **Reviewer #1:**

This is a good review, but I have a few comments.

**Response:** we appreciated your positive comments, many thanks

1) Figure 1 is not relevant to the review and should be deleted

**Response:** thanks for the advice; the figure was removed

2) it should be clarified why the found publications were not included in the review

**Response:**

Dear reviewer, thanks for this notice. To start with, we mentioned in the methodology section the inclusion and exclusion criteria upon which we decided the studies to be included in the analysis (language barrier, number of the cases, ability to extract the data, and other criteria); furthermore, the number of excluded

articles were mentioned in the PRISMA chart; however, we have to admit that we had difficulties in defining which article to be included and which do not. The first issue we faced is the inclusion of case reports; during the literature search, we found a lot of case report related to the study subject; however, we did not have a clear definition of the minimum number to be included in our analysis or not, according to Esene et al. (Five is the Maximum Sample Size for Case Reports! Statistical justification, Epidemiological Rationale and Clinical Importance. DOI: 10.1016/j.wneu.2014.05.014) they defined a cut off value of five cases to differentiate between case report and case series, we used this rule to exclude the articles reporting less than five cases. The second issue was the ability to extract the data of interest, for example, in a study by Trikha et al. (Midterm results of trochanteric flip osteotomy technique for management of fractures around the hip, DOI: 10.5301/hipint.5000539), the authors included eight cases of associated femoral head injuries in their series; however, it was difficult to extract the exact data and results of these cases to be included in our metanalysis. A third issue was the language barrier, as in a study by Tang et al. (SURGICAL HIP DISLOCATION APPROACH FOR TREATMENT OF FEMORAL HEAD FRACTURE, <https://pubmed.ncbi.nlm.nih.gov/26875261/>) the authors reported on 15 cases; however, the study was reported in Chinese, so it had to be excluded. The last issue is the duplication of the data from a previous study, as reported in the systematic review by Guo et al. that the cases treated through SHD in the study by Kloen et al. (Kloen P, Siebenrock KA, Raaymakers EL, Marti RK, Ganz R (2002) Femoral head fractures revisited. Euro J Trauma 4:221–233) were again included in their more recent study which we included in the analysis by Henle et al. (Henle P, Kloen P, Siebenrock KA (2007) Femoral head injuries: which treatment strategy can be recommended? Injury 38:478–488).

-We included the details of the excluded articles (without references) in the body of the manuscript as following: (one article not in English, six articles were case reports or included less than five cases, two articles the data of interest could not be extracted and in one article the same data was reported in one of the included articles).

3) all abbreviations in the table must be spelled, even if they have already been spelled in the text of the manuscript

**Response:** corrected

## **EDITORIAL OFFICE'S COMMENTS**

### **(1) Science editor:**

**Response:** all the comments and queries raised by the reviewer were corrected and responded to, as shown above.

#### **Issues raised:**

(1) The language classification is Grade B.

**Response:** Dear Editorial office, thanks for suggesting language editing services, sadly we do not have any access to any kind of fund to help with the payment for these services; instead, we carried extensive language editing and polishing; first, we had an assist from a native English speaker friend, second, we used the subscription version of Grammarly software, and we attached the report of the English editing and evaluation result. All changes and corrections in the manuscript were highlighted.

(2) The authors did not provide original pictures. Please provide the original figure documents. Please prepare and arrange the figures using PowerPoint to ensure that all graphs or arrows or text portions can be reprocessed by the editor;

**Response:** we ensure that the provided figures are all original and we had provided them in a PowerPoint as requested (the number of the figure and the description is presented in the notes box in each slide)

(3) The “Article Highlights” section is missing. Please add the “Article Highlights” section at the end of the main text;

**Response:** added to the manuscript

(4) Please confirm if the figures are original.

**Response:** we confirm that the figures are original

**(2) Company editor-in-chief:**

I have reviewed the Peer-Review Report, full text of the manuscript, and the relevant ethics documents, all of which have met the basic publishing requirements of the World Journal of Orthopedics, and the manuscript is conditionally accepted.

**Response:** We appreciate the supportive comments, and we are willing for final full acceptance and publication. The revised manuscript was rearranged and corrected according to the reviewer recommendation, editorial office comments, and according to the journal authors guidelines, all changes made in the manuscript were highlighted.

Sincerely, the authors