April 5, 2022

Dear Editor,

Please find attached files of revised manuscript in word format.

Reviewer's code: 06143766

SPECIFIC COMMENTS TO AUTHORS

The topic of this work is interesting. In this manuscript, a total of 137 patients underwent

surgical treatment for a pilon fracture were selected and divided into two groups

according to whether it develop an infection to compare risk factors for postoperative

infection after open reduction and internal fixation for a pilon fracture. Demographic,

clinical, and surgical factors were compared between the two groups. A binary logistic

regression analysis was used to determine the OR and corresponding 95%CI for

significant risk factors for postoperative infection. They finally concluded that Infection

prevention for patients with a Ruedi-Allgower fracture type III, surgical incision type III,

wound contamination, and diabetes lowers the postoperative infection risk after surgical

management of tibial pilon fractures. The tables help the readers to make a more

understanding of the study. The whole manuscript is well drafted. Also, the manuscript

also reviewed previous related literature. However, I have the following questions and

comments:

Why did you choose these indicators from the current study as the focus? Why not

choose something else?

**Answer:** We choose these indicators because that there is a need in practice to identify

the risk factors for non-union of these fractures to formulate and implement appropriate

prevention and treatment measures during the perioperative period to reduce the

likelihood of postoperative infection.

There are a few results at present. Are there any other findings? If possible, additional

studies are needed to make the results more credible.

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**Answer:** We supplemented with additional research to make the results more credible. We will perform further studies in the future. Thank you.

English language correction through the manuscript.

**Answer:** English correction has been made by an language editing company.

Reviewer's code: 06143784

SPECIFIC COMMENTS TO AUTHORS

Dear author, thank you for sharing your article entitled "Identification of risk factors for

surgical site infection after type  $\, {
m II} \,$  and type  $\, {
m III} \,$  tibial pilon fracture surgery". Your article

is good in grammar and scientific writing rules. The topic is actual and well described.

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7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568 **E-mail:** bpgoffice@wjgnet.com https://www.wjgnet.com

## PEER-REVIEW REPORT

Name of journal: World Journal of Clinical Cases

Manuscript NO: 72401

Title: Identification of risk factors for surgical site infection after type II and type III

tibial pilon fracture surgery

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06143775 Position: Peer Reviewer Academic degree: PhD

**Professional title:** Associate Professor

Reviewer's Country/Territory: Germany

Author's Country/Territory: China

Manuscript submission date: 2022-02-22

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-02-28 00:05

Reviewer performed review: 2022-03-11 08:12

**Review time:** 11 Days and 8 Hours

Scientific quality	[ ] Grade A: Excellent [ ] Grade B: Very good [Y] Grade C: Good [ ] Grade D: Fair [ ] Grade E: Do not publish
Language quality	[ Y] Grade A: Priority publishing [ ] Grade B: Minor language polishing [ ] Grade C: A great deal of language polishing [ ] Grade D: Rejection
Conclusion	[ ] Accept (High priority) [ Y] Accept (General priority) [ ] Minor revision [ ] Major revision [ ] Rejection
Re-review	[ ]Yes [Y]No



## Baishideng **Publishing**

7041 Koll Center Parkway, Suite 160, Pleasanton, CA 94566, USA **Telephone:** +1-925-399-1568

E-mail: bpgoffice@wjgnet.com

https://www.wjgnet.com

Peer-reviewer

Peer-Review: [Y] Anonymous [] Onymous

statements Conflicts-of-Interest: [ ] Yes [Y] No

## SPECIFIC COMMENTS TO AUTHORS

The article provides an essential reference for researchers in this field and the results are interesting and could be useful for other studies. Patients with these risk factors included type III fracture, a surgical incision type III, presence of wound contamination, and diabetes should be monitored closely to improve outcomes. As such, their findings provide a basis to develop prevention protocols to lower the risk of postoperative infection and improve the outcomes of patients with tibial pilon fractures. Editing and proofreading are needed to maintain the best sense of reading. I recommend that the manuscript can be published.