#### 2 Peer-review report

Reviewer #1: This is an interesting and meaningful study, and I recommend accept.

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Reviewer #2: 1 Title. - reflects the main subject/hypothesis of the manuscript.

2 Abstract. Summarizes and reflects the work described in the manuscript.

Line 8 - should be confused with infection.

#### →Thanks for your comment. We accepted your comment and modified it.

3 Key words. The key words reflect the focus of the manuscript.

4 Background. The manuscript adequately describes the background, present status and significance of the report.

Line 47: Etc. should not be used in this context.

→Thanks for your comment. We deleted "etc".

Line 57: should be confused with infection

→Thanks for your comment. We accepted your comment and modified it.

5 and 6 - Case discussion - Adequate in description.

Lines 71-72: How many knots were tied? Only medial row? Was a subacromial decompression done?

## ➔ Thanks for your comment. According to the previous operation record, subacromial decompression and suture bridge repair (one medial anchor & two lateral anchors) were done.

Lines 79-80: What was the AROM postoperatively but before this current episode?

### ➔ Thanks for your comment. As patient's history taking, she got a full active ROM around 6 weeks after surgery. However, acute pain developed 2 days ago.

Lines 89-90: Was there thought of aspirating the glenohumeral joint?

# →Thanks for your comment. Before the procedure, we always check imaging examinations. (MRI or ultrasonography) We found a moderate amount of bursal fluid using MRI. So we did aspiration in the subacromial bursa space.

Line 110: What was the reason for inflammatory tissues with the glenohumeral joint when it appears the problem was confined to the subacromial space?

# → Thanks for your comment. The patients underwent ARCR 4 months ago and the inflammation of the glenohumeral joint was the mild grade. For this reason, we think that it was a normal postoperative reaction.

7 Discussion. The manuscript interprets the findings adequately and appropriately, highlighting the key points concisely, clearly and logically. The findings and their applicability/relevance to the literature stated in a clear and definite manner. The discussion is accurate and discusses the paper's scientific significance and/or relevance to clinical practice sufficiently.

8 Illustrations and tables. adequate legend - the figures are not viewable.

### →Thanks for your comment. We checked the figure's state.

9 Biostatistics. N/AIs t

10 Units. N/A

11 References. adequate in number and quality

12 Quality of manuscript organization and presentation. The manuscript is well, concisely and coherently organized and presented. The style, language and grammar is accurate and appropriate unless otherwise noted.

13 Research methods and reporting. Authors should have prepared their manuscripts according to manuscript type and the appropriate categories, as follows: (1) CARE Checklist (2013) - Case report; (2) CONSORT 2010 Statement - Clinical Trials study, Prospective study, Randomized Controlled trial, Randomized Clinical trial; (3) PRISMA 2009 Checklist - Evidence-Based Medicine, Systematic review, Meta-Analysis; (4) STROBE Statement - Case Control study, Observational study, Retrospective Cohort study; and (5) The ARRIVE Guidelines - Basic study. The authors prepared the manuscript according to the appropriate research methods and reporting.

14 Ethics statements. For all manuscripts involving human studies and/or animal experiments, author(s) must submit the related formal ethics documents that were reviewed and approved by their local ethical review committee. The manuscript met the requirements of ethics.