

Dear Editor,

Name of journal: World Journal of Orthopedics

ESPS Manuscript NO: 17110

The manuscript has been improved according to the suggestions of reviewers and administrators;

1. Format has been updated as suggested by administrators
2. Revision has been made according to the suggestions of the editor's comments.
- 1) We could not make any correction for reviewer's comments because no suggestions from Reviewer 02444787; (well written paper) and we answer for comments of Reviewer 00724254;

As follows as;

- 2) Reviewer 00724254;

I have read with interest your article. My questions are: In the introduction could be of interest to point the real frequency, in the large series, in the efficiency of two stage management of the THA. In the diagnostic methods speaking about the necessity of at least two criteria I think that the four mentioned in article have not the same importance? (CRP of 12 is not so important than presence of purulence. In the surgical procedure the tubercle bacillus should be identified with the microbiological name. In the results I think that authors must be points about the co-morbidity in the cases of bad results. In the discussion although some authors give information about the colonization in the surface of ALBC, this item is not worldwide accepted.

Answer:

We presented the results from 2 stage reimplantation with or without use of antibiotics impregnated cement spacer as table and it will be too redundant introduction to describe each result in introduction.

Despite the multitude of test available to diagnose PJI, what exactly defines PJI remains controversial. The diagnosis of PJI can be challenging as most tests do not evaluate specifically for the presence of PJI but rather are indirect measures of infection. We very well understand reviewer's points for our definition of infection and accept but our diagnostic method for PJI generally has been well accepted method before the recently proposed modified Musculoskeletal

Infection Society (MSIS) definition of PJI provides standardized method to aid in the diagnosis of infection.

We already pointed out the importance of co-morbidity as risk factors for failure in 2 stage reimplantation for the treatment of PJI in discussion.

There have been so many studies demonstrated persistence of bacteria on antibiotic loaded acrylic depots in vitro and vivo, and there were many studies which improved or prevented biofilm formation on the surface of bone cement.