

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Orthopedics

**Manuscript NO:** 60456

**Title:** Acute syndesmotic injuries in ankle fractures: From diagnosis to treatment, current concepts

**Reviewer's code:** 01209736

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

**Reviewer's Country/Territory:** Canada

**Author's Country/Territory:** Italy

**Manuscript submission date:** 2020-10-31

**Reviewer chosen by:** Jin-Lei Wang

**Reviewer accepted review:** 2021-02-24 18:20

**Reviewer performed review:** 2021-02-24 22:15

**Review time:** 3 Hours

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|---------------------------------|---|
| <b>Scientific quality</b>       | <input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| <b>Language quality</b>         | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>               | <input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority)<br><input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| <b>Re-review</b>                | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |
| <b>Peer-reviewer statements</b> | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous<br>Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

## **SPECIFIC COMMENTS TO AUTHORS**

This is a partially complete review of the latest concepts of syndesmotomic injury. It needs a major revision. Surgical treatment - no mention of ORIF of the posterior malleolus, indications for ORIF with a post. mall. injury. - what if

the PTFL is ruptured but the syndesmosis is accurately reduced by ORIF of a post. mall. fracture? - what if the PTFL is not ruptured but there is a

big post. mall. fracture? How to reduce this and treat this entity? Then syndesmotomic fixation is avoided. This needs to be added. Authors preferred surgical method - no mention of the order of fixation when there is a trimalleolar fracture with syndesmotomic injury(usually fibula first, then post. mall. and then medial mall, then syndesmosis).

Other components missing in paper - 1) what about indications for CT scan preop? 2) what about Heterotopic bone forming in syndesmosis postop and complications of such?

3) what about different approaches posterior medial or posterior lateral to approach the different Haraguchi type posterior mall. injuries? 4) what about overcompression of the syndesmosis with a syndesmotomic screw if the foot is dorsiflexed and a clamp is put on too tight? 5) what about the pain that is resolved when an "overtight" syndesmotomic screw is removed as the syndesmosis results in the position that it should have been reduced in (rather than over compressed)? References - Ref. 80 is a good prospective RCT. You are missing others that are of the few solid studies in the literature and should be included. A) D. Sanders, C. Tieszer, B. Korbett, for COTS, Operative versus Non

operative treatment of unstable lateral malleolar fractures: A randomized multi-center trial, JOT, 26:129-134, 2012 B) Sanders D, Schneider P, Taylor M, Tieszer C, Lawendy A-R. Improved Reduction of the Tibiofibular Syndesmosis with Tightrope compared with Screw Fixation: Results of a RCT. 2019 JOT 33; 11:531-537. Fig 6 shows soft tissue windows and needs to be changed to show bone windows Need a new Figure that



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shows posterior mall. fixation that deals with the syndesmotic widening as the PTFL is not ruptured with a trimalleolar fracture that is treated well with ORIF.

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** World Journal of Orthopedics

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|                                 |   |
|---------------------------------|---|
| <b>Scientific quality</b>       | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish            |
| <b>Language quality</b>         | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing<br><input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| <b>Conclusion</b>               | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority)<br><input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection             |
| <b>Peer-reviewer statements</b> | Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous<br>Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

## SPECIFIC COMMENTS TO AUTHORS

Good revision. Still many spelling mistakes and misuse of the English language or context but no medical or subject deficiencies.