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**Name of Journal:** *World Journal of Orthopedic*

**ESPS Manuscript NO:** 20093

**Manuscript Type:** MINIREVIEWS

### Answering reviewers

#### Reviewer 1

The submitted manuscript is reviewing the current literature regarding the squeaking phenomenon following total hip arthroplasty.

The title is referring directly to the problem. The abstract is sufficient and the Introduction is referring to the problem at hand. Material and Methods are missing and so Results. Discussion is embodied to the various subchapters of the manuscript, mainly based to the "current literature" and finally the submitted manuscript is ending with 61 references.

It is not clear if the "current literature" is an at random selection from the available data bases.

Scientific papers should be organized in a simple way in order to facilitate both the specialized and the common reader.

A review of the current literature is a manuscript considering the present status of current knowledge to a particular topic.

Among the instructions to authors of WJO is included manuscript preparation; where, *Abstracts* should be structured into the following sections: Aim or purpose of the study, Methods, Results, and Conclusion. The *Text* should be structured into the following sections: Introduction, Materials and Methods, Results and Discussion.

The structure of the present manuscript is different from one used by the WJO. Although the submitted manuscript it is an interesting one and possesses valuable scientific and statistical information, the present review, as it is organized, is rather confusing the reader.

**Answer:**

**Thank you for your comment. Unfortunately, due to the fact that this article is a balanced review of the literature with respect to squeaking phenomenon we could not sub classify it according to the suggested order re Introduction, Materials and Methods, Results and Discussion. More specifically we find it hard to describe material and method as well results. Therefore, we described it in different chapters throughout the manuscript. These different sections contain certain concerns and ideas involve with squeaking. We believe that each section presents a balance summary of the literature, however as expected we cannot include all the manuscripts that were published on the topic.**

### **Reviewer 2**

Nearby accepted as it is. However: 1. Shorten the text where it is possible 2. Make a secondary language Revision 3. Resubmit

**Answer:**

**We read and revised any language errors. We have tried to shorten the text whenever possible.**

### **Reviewer 3**

Overall an interesting up to date assessment of ceramic squeaking including a useful section on how to deal with patients whose joints squeak. A few corrections/improvements, perhaps the authors would be willing to make these changes.

Line 29 spelling impingement-

**Answer: changes made**

Line 75/6: ... has enabled THA become a surgical option for younger patients... but the registry data shows no increase in younger patients

receiving THA over the past 10 years for the <55 and 55-65 age groups. Can this be re-worded?

**Answer: We have changed the section according to the reviewer suggestion**

**New section: The worldwide increase in THA demand together with the improvement in instrumentation, surgical techniques and biomaterials has allowed THA become a common surgical option. Data acquired from the Australian National Joint Registry estimated that 13% of the patients undergoing THA are younger than 55 years. [3]. The revision rate in this age group was 11.3% at 12 years, which was the highest rate amongst all age groups. According to this registry, loosening and osteolysis are the leading causes for revision THA**

Line 103: do these referenced studies really say that the use of COC is reducing? Reference to the UK NJR could be made here, there is a graph showing bearing use over the past 10 years and shows CoC is reducing slightly in the past 2/3 years.

**Answer:**

**We have deleted the references and added the reference per the reviewer request. The new paragraph: According to the UK National Joint Registry there is a decline in the use of CoC bearings in THA. It is possible that squeaking may have led to this trend.**

Line 117 stripe wear, not strip wear – stripe wear has become the description for the phenomenon, no need to introduce a new term. Strip wear sounds like something you would see entertainers wearing in a dodgy nightclub.

**Answer: changes made**

Line 324. Appears to show the Deltamotion/Tri-lock as a bad combination, but also balance it out with a positive message - this combination has the lowest revision rate in the Australian registry data 0.3% at 3 years (although only available in short term due to new device).

**Answer: added according to the reviewer request**

**In spite of the high squeaking rate reported the short term clinical results of the Deltamotion/TriLock combination show a low revision rate in the Australian registry data 0.3% at 3 years.**

Overall, I would like to see some consideration of studies that have found noisy hips have an increased chance of failure. I'm not sure if this is correct, but it should be discussed in the review article, e.g. Traina, Toni, Hip international 2012.

**Answer:**

We have added the following section:

**Squeaking and the association with implant failure are not clearly understood. Toni et al reported that an audible noise had an association with ceramic fracture. 80.7% (21 hips) which produced a noise resulted in a fracture compared to the non-audible group which had only 6.1% (3 hips) ceramic fracture. A recent case report has also reported on a ceramic femoral head fracture following squeaking. Due to the multifaceted nature of squeaking it is not clearly understood if squeaking itself is a sole reason to implement ceramic fractures.**