

Dear World Journal of Orthopedics,

We have addressed all editorial concerns for our manuscript entitled, “Allograft Tissue Irradiation and Failure Rate after ACL Reconstruction: A Systematic Review”. The following changes have been made to the manuscript.

- 1) A running title has been added to all pages that is less than 6 words and is entitled, “ ACL Allograft Irradiation Failure Rate”
- 2) The manuscript title has been changed to be 12 words or less and is now, “Allograft Tissue Irradiation and Failure Rate after ACL Reconstruction: A Systematic Review”
- 3) All Author Contributions, Conflict-of-interest, data sharing and correspondence information is up to date.
- 4) The abstract was appropriately formatted to include, “aim, methods, results and conclusions”.
- 5) Five key words were added.
- 6) Comments were added to the end of the manuscript, including background, research frontiers, innovations and breakthroughs, applications, terminology and peer review.
- 7) All citations were reviewed and re-formatted with brackets and were moved to the end of each sentence or after author names.
- 8) All references were reviewed and re-formatted to include the PMID and DOI where applicable.

Reviewer #1:

**Comments To
Authors**

Though there is limited data regarding this topic, this was a good review of that data. It was succinct with a clear conclusion. There were only a few minor suggestions, listed below. Line 133 – not aware of association between autograft and arthrofibrosis. If so, should provide reference. Line 130 – Misleading statement, cost is typically lower with autograft even with increase operative time. This statement regarding cost should be removed. Line 358 – There are ‘some’ advantages, not ‘many.’

We have address all of the comments made by Reviewer Number 1. Please see the manuscript.

Reviewer #2:

Indeed this is a useful systematic review on the use of allograft for ACL reconstruction particularly focusing on the effect of the sterilization process on its biomechanical properties and clinical outcomes. The authors in a simple way introduce the reader to the ACL reconstruction graft options, sterilization

process in relation to the results, both clinical and laboratory giving them the opportunity to implement to their practice a better use of grafts for ACL reconstruction To note though: 1. The title focuses on the clinical effect of the sterilization process but in the manuscript and the literature provided findings are related to biomechanical and functional results with failure being only a small parameter for the evaluation of the graft. In my opinion the title could be modified including also the function and biomechanical properties of the allograft. 2. It would be interesting to comment more on the trend towards using allografts for ACL reconstruction 3. Grammatical and language polishing would be required as also given with the yellow marks on the manuscript attached.

Comments to Reviewer #2:

Thank you for your review of our manuscript. We have changed the title to be more general to address your concerns. "Allograft Tissue Irradiation and Failure Rate after ACL Reconstruction: A systematic Review". This manuscript is very comprehensive and focuses on the irradiation of allograft tissue. By adding another section on the trend of allograft vs autograft would significantly increase the length of the manuscript without adding any value. We have made the changes to the manuscript to correct any grammar errors. Thank you.

Answer to chief editor:

Hi WJO,

Thank you for the comments.

We have made the revision according to the suggestion of the chief editor.

Please see the attached manuscript and also the excel files with the tables attached.

Let me know if you need any more information.

Thanks

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