

Reviewer number 70422 comments:

Knowledge of the current research status and future directions for LBP diagnostics and stratified care is essential to help engage clinicians in evidence based practice and to potentially improve patient management.

Response to reviewer:

Thank you for the positive comments and support for the publication of the editorial

Reviewer number 505361 comments:

Dear Authors This is an interesting paper with well written. However, I have some comments as follow; 1.Abstract:Add the overall results of treatment on low back pain. 2.Introduction:Point the gap of knowledge especially emphasis on treatment of low back pain. 3.Methods:Added the method of recruitment the paper and review methods. 4.General comments :segment the result of each topic such as for intervention for low back pain, the authors should segment into conservative treatment,lumbar fusion and rehabilitation.

Response to reviewer:

Thank you for your comments. With regards to the abstract, your comment recommends including the overall results of treatment on low back pain. I must however stress that this is not the aim of the editorial. The aim of the editorial is instead to highlight current research status and future directions for LBP diagnostics and stratified care rather than state overall results. In consideration to your recommendation to emphasis in the introduction the gap of knowledge for the treatment of low back pain, we have made the following amendment in the editorial's introduction: "The choice of treatment merely based on benign anatomic impairment or individual clinical assessment techniques with low diagnostic accuracy is controversial **and may result in suboptimal outcomes**[10]. **Treatment focused on patient specific and modifiable pain mechanisms assessed with accurate diagnostics has the potential to improve patient outcomes**. Therefore, research in these topics is of utmost importance." Regarding your recommendation to include the method of recruitment in paper and review methods, I argue that this is not suitable for an editorial but rather if the manuscript was written as a review article. I also argue that the topic themes used "primary" and "secondary" health care setting is more appropriate for the editorial rather than segmenting the manuscript into subheadings such as conservative treatment, lumbar fusion and rehabilitation. I have made the following amendment to the subtitle in the manuscript "Evidence base for secondary/**tertiary** health care interventions for low back pain and future research directions" to show that interventions in the secondary health care setting can occur even in the tertiary health care setting.