

## PEER-REVIEW REPORT

**Name of journal:** World Journal of Clinical Cases

**Manuscript NO:** 61973

**Title:** Efficacy of topical versus intravenous tranexamic acid in reducing blood loss and promoting wound healing in bone surgery: A systematic review and meta-analysis

**Reviewer's code:** 05291148

**Position:** Peer Reviewer

**Academic degree:** MD

**Professional title:** Doctor

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

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

**Manuscript submission date:** 2020-12-24

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2020-12-24 15:56

**Reviewer performed review:** 2020-12-26 15:20

**Review time:** 1 Day and 23 Hours

<b>Scientific quality</b>	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
<b>Language quality</b>	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <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) <input checked="" type="checkbox"/> Minor revision <input 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 Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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## **SPECIFIC COMMENTS TO AUTHORS**

Thanks for the opportunity to review this manuscript. This is a systematic review and meta-analysis involving clinical trials that evaluate the efficacy of topical versus intravenous TXA in reducing blood loss in different bony procedures. Although TXA has been increasingly recognized as an effective strategy to reduce blood loss and its complications, systematic reviews and meta-analyses are always helpful to systematically summarize and evaluate the literature results. In addition, considering the increased use of TXA, this study may contribute to the clinical use of TXA. The manuscript is well-written and the figures are clear and well-presented. However, some considerations might be mentioned. Regarding the wound healing aspect after TXA, although I agree with the authors that, by reducing blood loss, TXA might be beneficial for improving wound healing, the included articles did not directly assess that. Conversely, some of those articles did not show differences between wound complications when compared patients with or without TXA application. The fact that TXA use does not increase the risk of wound complication does not necessarily mean that TXA decreases its complications, or more than that, TXA promote wound healing. Therefore, the results presented in this review do not support this is assumption. The authors should reconsider this statement.