

PEER-REVIEW REPORT

Name of journal: *World Journal of Orthopedics*

Manuscript NO: 65448

Title: Impact of enhanced recovery pathways on safety and efficacy of hip and knee arthroplasty: A systematic review and meta-analysis

Provenance and peer review: Invited manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05433505

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Ukraine

Author's Country/Territory: Netherlands

Manuscript submission date: 2021-03-25

Reviewer chosen by: AI Technique

Reviewer accepted review: 2021-04-29 03:26

Reviewer performed review: 2021-05-20 01:40

Review time: 20 Days and 22 Hours

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| Scientific quality | <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 Grade E: Do not publish |
| Language quality | <input type="checkbox"/> Grade A: Priority publishing <input checked="" type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection |
| Conclusion | <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 |
| Re-review | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

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| Peer-reviewer statements | Peer-Review: [<input checked="" type="radio"/>] Anonymous [<input type="radio"/>] Onymous Conflicts-of-Interest: [<input type="radio"/>] Yes [<input checked="" type="radio"/>] No |
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SPECIFIC COMMENTS TO AUTHORS

This work was conducted on an actual topic, the enhancement of recovery pathways in patients after THA and TKA; it is a well written and structured article, the systematic review and meta-analysis were sufficiently elaborated and presented data are statistically significant. Although this, I have one question as a main issue: how can we consider under one recovery pathway groups of patients after UKA, TKA and THA; in my opinion these are different categories, needing different approaches for their recovery, therefore different cost of treatment and time for recovery. I suggest presenting separately the results of patients after different arthroplasties.