

PEER-REVIEW REPORT

Name of journal: *World Journal of Orthopedics*

Manuscript NO: 75883

Title: Short arm cast is as effective as long arm cast in maintaining distal radius fractures reduction: results of the SLA-VER noninferiority trial

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05486871

Position: Peer Reviewer

Academic degree: Doctor, PhD

Professional title: Academic Research, Lecturer, Physiotherapist

Reviewer's Country/Territory: Turkey

Author's Country/Territory: Italy

Manuscript submission date: 2022-02-27

Reviewer chosen by: AI Technique

Reviewer accepted review: 2022-03-06 06:54

Reviewer performed review: 2022-03-07 10:18

Review time: 1 Day and 3 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input checked="" type="checkbox"/> Grade E: Do not publish
Language quality	<input 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 checked="" type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input checked="" 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="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

The manuscript should be re-written regarding international guidelines for the RCTs.
Some of the essential procedures are missing (e.g., recruitment process).

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Reviewer's code: 03518978

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Italy

Manuscript submission date: 2022-02-27

Reviewer chosen by: Xin Liu

Reviewer accepted review: 2022-04-11 15:44

Reviewer performed review: 2022-04-14 02:08

Review time: 2 Days and 10 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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
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Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

**Peer-reviewer
statements**

Peer-Review: [☒] Anonymous [☐] Onymous

Conflicts-of-Interest: [☐] Yes [☒] No

SPECIFIC COMMENTS TO AUTHORS

This study compared the efficacy of BEC (143 patients) and AEC (137 patients) in maintaining reduction of manipulated DRFs. It has been found that the mean loss of RL, RI, VT were respectively 1,59 mm, 2,83°, 4,11° for BEC and 1,63 mm, 2,54°, 3,52° for AEC. The end treatment differences between BEC and AEC in RL, RI, VT loss were respectively 0,04 mm [CI 95%; -0.36;0.44], -0,29° [CI 95%; -1.03;0.45], 0,59° [CI 95%; -1.39;2.57] and they were all below the prefixed noninferiority thresholds. The rate of loss of reduction was similar. It concluded that BEC performs as well as AEC in maintaining the reduction of a manipulated DRF. Being it more comfortable to patients, BEC may be preferable for nonoperative treatment of DRFs. In general, this is an interesting study. It showed that short arm cast is equally effective as long arm cast to treat DRFs. However, there are a few concerns that need to be clarified: 1. Did the patients receive any closed traction and manual reduction before AEC and BEC, especially, for the type C and significant displacement type a and B? If so, did the patients receive any local anesthesia? 2. Had the cast ever been changed through the cast immobilization time? If not, how to prevent the cast immobilization failure? 3. For the different subtype of the fractures, the wrists were casted in same position?

RE-REVIEW REPORT OF REVISED MANUSCRIPT

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Peer-review model: Single blind

Reviewer's code: 03518978

Position: Peer Reviewer

Academic degree: MD

Professional title: Associate Professor

Reviewer's Country/Territory: United States

Author's Country/Territory: Italy

Manuscript submission date: 2022-02-27

Reviewer chosen by: Han Zhang

Reviewer accepted review: 2022-06-26 13:13

Reviewer performed review: 2022-06-26 13:37

Review time: 1 Hour

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Very good <input checked="" 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 checked="" type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Peer-reviewer	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous



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statements

Conflicts-of-Interest: [] Yes [Y] No

SPECIFIC COMMENTS TO AUTHORS

The authors have addressed my concerns. I agree to publish this paper. Thanks!