

Reviewer #1: The author summarized current strategies including shoe modifications and foot orthoses to prevent and treat diabetic foot. However, there were some flaws that should be corrected.

1. The definition of diabetic foot is not widely used. In this manuscript, “The diabetic foot is a broadly defined diagnosis encompassing deformities, skin changes, ulcers, ischemia, infections, and neuropathy occurring in the feet of diabetic patients”. However, the widely accepted definition of diabetic foot is infection, ulceration, or destruction of tissues of the foot of a person with diabetes mellitus, usually accompanied by neuropathy and/or PAD. “The diabetic foot” in this manuscript actually include patients with high risk of diabetic foot. Thus, it is necessary to modify the title and corresponding content of the manuscript.

Answer: I agree with your opinion. We have revised the definition of the diabetic foot and the title of the manuscript.

2. Page 3, line 49, “The diabetic foot is caused by diabetic foot ulcers,” this might be a mistaken.

Answer: The sentence in line 49 on page 3 has been modified to explain the cause of diabetic foot ulcers.

3. Page 9, the authors arranged a paragraph to describe “charcot arthropathy”. In fact, charcot foot is part of diabetic foot. It could be introduced in the introduction part.

Answer: We have relocated the description of Charcot arthropathy to the introduction.

4. The mechanism that modified shoes and orthoses could reduce the risk of diabetic foot lies mainly on the offloading. This could be summarized before the detailed description of various modified shoes and orthoses.

Answer: A adapted footwear paragraph explains that modified shoes and orthoses can reduce the risk associated with diabetic foot by controlling the load and pressure on the foot. We have added a numerical reference description for pressure regulation to this paragraph on page 5.

5. Page 10, line 243. The prefabricated removable walking brace. It is note worth that nonremovable walkers are the first line suggestions in the IWGDF offloading guideline. Thus, to avoid misunderstanding, corresponding suggestions should be lined in this section.

Answer: We have added a description of the off-loading device and the non-removable off-loading device provided by the IWGDF guideline on pages 10-11.

Reviewer #2: The current study is on a topic of relevance and general interest to the readers of the journal. I found the review incomplete and not always clear therefore a major review is needed. There are several points to clarify before you can publish it. I explain my concerns in more detail below.

Major comments:

-Authors declare that the purpose of this narrative review was to provide a reference guide to support clinicians as they prescribe shoe modifications and foot orthoses to treat diabetic foot ulcers and Charcot joints, ma they only partially focus on off-loading for the management of foot ulcers.

Answer: We added the IWGDF guideline and common barriers and solutions to using off-loading devices to the orthoses paragraph on page 10-11.

-The authors make no reference to the IWGDF Guideline on off-loading foot ulcers in persons with diabetes.

Answer: On page 11, the description of off-loading devices presented by the IWGDF guideline was mentioned.

- Specifically, they do not describe non-removable knee device (or TCC or non-removable walker) with an appropriate foot-device interface as the first-choice of offloading treatment to promote healing of the ulcer.

Answer: We have added a description of the non-removable device, the first choice suggested by the IWGDF guideline.

Minor comments:

-The authors do not consider important aspects such as common barriers and solutions to using best off-loading treatments.

Answer: Considering common barriers and solutions to using the best off-loading treatments, we have written in the paragraph describing orthoses on pages 10-11.

-The bibliographic entries do not report important articles.

Answer: We have added several previous studies, including the IWGDF guideline, as references to support the explanation of diabetic foot, diabetic foot ulcer, Charcot joint, and off-loading devices. The list of added references is as follows.

Ref no.	Articles
1	van Netten JJ, Bus SA, Apelqvist J, Lipsky BA, Hinchliffe RJ, Game F, Rayman G, Lazzarini PA, Forsythe RO, Peters EJG, Senneville É, Vas P, Monteiro-Soares M, Schaper NC; International Working Group on the Diabetic Foot. Definitions and criteria for diabetic foot disease. Diabetes Metab Res Rev 2020; 36 Suppl 1: e3268 [PMID: 31943705 DOI: 10.1002/dmrr.3268]
31	Bus SA, Armstrong DG, van Deursen RW, Lewis JE, Caravaggi CF, Cavanagh PR; International Working Group on the Diabetic Foot. IWGDF guidance on footwear and offloading interventions to prevent and heal foot ulcers in patients with diabetes. Diabetes Metab Res Rev 2016; 32 Suppl 1: 25-36 [PMID: 26813614 DOI: 10.1002/dmrr.2697]
32	Fife CE, Carter MJ, Walker D, Thomson B, Eckert KA. Diabetic foot ulcer off-loading: The gap between evidence and practice. Data from the US Wound Registry. Adv Skin Wound Care 2014; 27: 310-316 [PMID: 24932951 DOI: 10.1097/01.ASW.0000450831.65667.89]
33	Zhang Y, Cramb S, McPhail SM, Pacella R, van Netten JJ, Cheng Q, Derhy PH, Kinnear EM, Lazzarini PA; Diabetic Foot Working Group, Queensland Statewide Diabetes Clinical Network, Australia. Factors

	Associated With Healing of Diabetes-Related Foot Ulcers: Observations From a Large Prospective Real-World Cohort. <i>Diabetes Care</i> 2021; 44: e143-e145 [PMID: 34074651 DOI: 10.2337/dc20-3120]
34	Lazzarini PA, Jarl G. Knee-High Devices Are Gold in Closing the Foot Ulcer Gap: A Review of Offloading Treatments to Heal Diabetic Foot Ulcers. <i>Medicina (Kaunas)</i> 2021; 57: 941 [PMID: 34577864 DOI: 10.3390/medicina57090941]
35	Lazzarini PA, Jarl G, Gooday C, Viswanathan V, Caravaggi CF, Armstrong DG, Bus SA. Effectiveness of offloading interventions to heal foot ulcers in persons with diabetes: a systematic review. <i>Diabetes Metab Res Rev</i> 2020; 36 Suppl 1(Suppl 1): e3275 [PMID: 32176438 DOI: 10.1002/dmrr.3275]
36	Bus SA, Armstrong DG, Gooday C, Jarl G, Caravaggi C, Viswanathan V, Lazzarini PA; International Working Group on the Diabetic Foot (IWGDF). Guidelines on offloading foot ulcers in persons with diabetes (IWGDF 2019 update). <i>Diabetes Metab Res Rev</i> 2020; 36 Suppl 1: e3274 [PMID: 32176441 DOI: 10.1002/dmrr.3274]
37	van Netten JJ, Seng L, Lazzarini PA, Warnock J, Ploderer B. Reasons for (non-)adherence to self-care in people with a diabetic foot ulcer. <i>Wound Repair Regen</i> 2019; 27: 530-539 [PMID: 31107578 DOI: 10.1111/wrr.12728]
38	Ploderer B, Brown R, Seng LSD, Lazzarini PA, van Netten JJ. Promoting Self-Care of Diabetic Foot Ulcers Through a Mobile Phone App: User-Centered Design and Evaluation. <i>JMIR Diabetes</i> 2018; 3: e10105. [PMID: 30305266 DOI: 10.2196/10105]
39	Griffiths DA, Kaminski MR. Duration of total contact casting for resolution of acute Charcot foot: a retrospective cohort study. <i>J Foot Ankle Res</i> 2021; 14: 44. [PMID: 34130722 DOI: 10.1186/s13047-021-00477-5]
40	Faglia E, Caravaggi C, Clerici G, Sganzeroli A, Curci V, Vailati W,

	Simonetti D, Sommalvico F. Effectiveness of removable walker cast versus nonremovable fiberglass off-bearing cast in the healing of diabetic plantar foot ulcer: a randomized controlled trial. Diabetes Care 2010; 33: 1419-1423 [PMID: 20357377 DOI: 10.2337/dc09-1708]
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Re-reviewer: The authors have considered my suggestion and improved the paper accordingly. I've non further comments on it.

Answer: Thanks for your comments.