

ESPS PEER-REVIEW REPORT

Name of journal: World Journal of Orthopedics

ESPS manuscript NO: 24993

Title: Arterial complications, venous thromboembolism and deep venous thrombosis prophylaxis after anterior cruciate ligament reconstruction: A systematic review

Reviewer's code: 03069318

Reviewer's country: United States

Science editor: Shui Qiu

Date sent for review: 2016-02-19 12:02

Date reviewed: 2016-03-01 06:16

CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good		<input type="checkbox"/> Duplicate publication	
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Plagiarism	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input checked="" type="checkbox"/> Minor revision
	<input type="checkbox"/> Grade D: Rejected	BPG Search:	<input type="checkbox"/> Major revision
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Introduction The incidence of arterial complications is rather small and this is probably the reason of not typically reported. Are the authors aware of any case reported in the literature of pulmonary hypertension as a result of ACL reconstruction? Please add with corresponding reference. Methods The authors need to be congratulated on this attempt. However, with the presented search strategy (screening of the abstract and title) there is a risk of excluding some studies with relevant. For example, potentially some studies report vascular complications in the full text, while those were not described in the abstract. The authors should highlight more that their search strategy focused on the studies where vascular complications were the main outcomes measured. The authors should clarify the 9th inclusion criterion. What do they mean by availability of the abstract and text? (Theoretically all are availability with journal transcription) The authors should provide more supporting information in the introduction about the importance of conducting this review. What the information that this review will provide will benefit the audience. The presence of the same author in both teams of abstract reviewing is problematic. According to PRISMA criteria, this does not

ensure independence in search. The authors should include this in the limitations of this work. The description of the synthesis of the results could be improved so as the exact process to be more clear. In table 3 the description of study design should be included in the table legend (were they all case reports?)

Results The answer in this research question is problematic since it is based only on the report of a retrospective study. Based on the number of ACL reconstructions performed each year and the small number of arterial complications found in this systematic search (23 cases) it appears that the reported incidence of 0.3% could be considered as high. Therefore, I would suggest that the conclusion of this section would be modified so as to reflect the lack of knowledge and the need of additional long-term studies to study incidence. In the second question regarding the types of arterial complications the description could be majorly benefit from inclusion of more specific information. For example, how often was the most commonly complication seen(I.e. pseudo aneurysm)? The authors should be more specific on the correlation under question and provide the presence (or absence) of a correlation early in this paragraph. The remaining description for the 18 studies between the arterial complications and acl surgical complications and the 4 studies to other conditions is unclear and needs to be re-organized. This conclusion may be true, but it does not represents the finding of this report. It should read something like " no correlation was found between..." This may sound similar but it is different to the statement that these complications can occur with any(this suggests that all these complications occurred with all of the above conditions in combination, which cannot be true due to the small number of reported cases. 5.. The authors should add the references that produce this range. Was any evidence that thrombophlebitis prevented the occurrence of DVT? The authors should provide more details for the deep venous thrombosis being more frequent with tourniquet time > 2 hours. Add details of the studies, how much did the risk increase, etc.

Discussion In the first paragraph of the discussion, the authors should focus in data that are coming from synthesis of the existing work. Therefore the prevalence of arterial complication that is based on a sole previously published report could be mentioned as a secondary finding. In contrast, the incidence of a symptomatic DVT reaching almost 10% is rather important. As mentioned before, the authors should add more quantitative data and specifics on the results. He way their re

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Name of journal: World Journal of Orthopedics

ESPS manuscript NO: 24993

Title: Arterial complications, venous thromboembolism and deep venous thrombosis prophylaxis after anterior cruciate ligament reconstruction: A systematic review

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> The same title	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> Duplicate publication	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input checked="" type="checkbox"/> Plagiarism	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input checked="" type="checkbox"/> No	<input type="checkbox"/> Major revision
		BPG Search:	
		<input type="checkbox"/> The same title	
		<input type="checkbox"/> Duplicate publication	
		<input type="checkbox"/> Plagiarism	
		<input checked="" type="checkbox"/> No	

COMMENTS TO AUTHORS

Excellent work.

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Title: Arterial complications, venous thromboembolism and deep venous thrombosis prophylaxis after anterior cruciate ligament reconstruction: A systematic review

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CLASSIFICATION	LANGUAGE EVALUATION	SCIENTIFIC MISCONDUCT	CONCLUSION
[Y] Grade A: Excellent	[Y] Grade A: Priority publishing	Google Search:	[Y] Accept
[] Grade B: Very good	[] Grade B: Minor language polishing	[] The same title	[] High priority for publication
[] Grade C: Good	[] Grade C: A great deal of language polishing	[] Duplicate publication	[] Rejection
[] Grade D: Fair	[] Grade D: Rejected	[Y] No	[] Minor revision
[] Grade E: Poor		BPG Search:	[] Major revision
		[] The same title	
		[] Duplicate publication	
		[] Plagiarism	
		[Y] No	

COMMENTS TO AUTHORS

Systematic review on thromboembolic events and its prophylaxis after ACL reconstruction. This is a very interesting topic since there is no consensus regarding DVT prophylaxis following ACL reconstruction. Comments: too many abbreviations in the abstract session. Abstract should ideally contain no abbreviations at all. I would exclude them all, or maybe just leave the very commonly used and very often repeated in text, such as ACL and DVT in Core tip: Vascular complications Introduction is objective, states the relevance of the subject, the gap in the literature and highlights the importance of the current analysis. Methods were conducted according to the PRISMA statement. The discussion section could be shortened and still made its point, specially regarding the use of tourniquet. I congratulate the authors for the very well written article.