

Dear Editor,

Please find enclosed the revised manuscript in Word format (file name "Revised edition").

Title: Dissection and ligation of the lateral circumflex femoral artery is not necessary when using the direct anterior approach for total hip arthroplasty

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Name of Journal: World Journal of clinical cases

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Manuscript Type: Clinical Trials Study

Thank you very much for your kind e-mail, which gave us the possibility to revise our manuscript. We emended the paper according to the reviewers' comments. We hope this revision will make our manuscript better to be accepted in your journal.

Each comment has been answered accordingly in the manuscript and each text that has been altered was highlighted yellow in the revised manuscript. We hope that the revised version will fulfill the requirements for publication in the World Journal of clinical cases. Thank you very much.

Reply to editorial comments:

Please add this statement, such as, the study was reviewed and approved by the Hungarian National Review Board and the Institutional Review Board of

the University of Debrecen.

Answer: I have added.

Please add clinical trial registration

Answer: I have added.

Please add the CONSORT 2010 statement:

Answer: I have added. I also have the CONSORT 2010 statement form in the attachment.

Please write the article highlight section according to the guidelines listed below.

Answer: I haven't written anything like this before, I don't know whether it is desirable with the requirements, if it is not with the requirements, please tell me in time, I will correct it, thank you.

We found that the content of the figures cannot be edited by our staff. Authors have to provide the figures as separate electronic files. Please upload the figures in the following vector or bitmap formats so that we will be able to edit them:

Answer: Figure1 saved as a PowerPoint and a TIFF. Figure2 is CONSORT flow diagram, I saved as a Word format and a TIFF.

Reply to reviewer's comments

Good paper, but you should provide real results, not opinions, see last comment in reviewed manuscript. Both of these methods are applied by a great number of surgeons in an alternating manor depending on their intraoperative decision making. This paper supports this ongoing practice. Please correct orthographic errors.

Answer: Thank you for your recognition of our work. I can't agree with you

more. Although these two methods are widely used by surgeons, most of the operators in direct anterior total hip arthroplasty use ligation to treat the vessel. Ligation is time-consuming and troublesome. Most joint surgeons are used to ligating this vessel, but we found by comparison that ligation was not necessary. Although our concerns are relatively small, we hope that this study will lead to a consensus.