

Reviewer 02444860

Congratulations on this extensive review of prenatal diagnostic techniques on congenital spinal disorders

*Thank you for your comments.*

Reviewer 02446219

The manuscript reviewed some radiologic techniques in prenatal spinal column anomalies. The review almost comprehensive and provide practical and useful information in this field. It is better both pre natal and post natal assessments be mentioned.

*Thank you for your comments. We addressed prenatal imaging techniques (ultrasound and MRI) as well as postnatal techniques (XR, CT, MRI) in the review.*

Reviewer 02452864

1) This was a comprehensive review and summary of the most common congenital spinal anomalies, including: Chiari Malformation, myelomeningocele, tethered spinal cord, diastematomyelia, segmentation anomalies, and lumbosacral agenesis. Pre- and postnatal diagnosis and treatment options were discussed for each condition. 2) The manuscript is well organized overall, and consistent in the approach for each topic. However, the importance of prenatal diagnosis from a spine surgeon's perspective is limited. Only one of the conditions mentioned had any prenatal treatment option. As such, the benefit of a prenatal diagnosis is not particularly meaningful for a surgeon.

*Thank you for your comments. At our institution, the surgeon is a critical member of the fetal care unit and we are directly involved in prenatal counseling when congenital spinal anomalies are identified. As such we feel this information is particularly important for the orthopedic or neurosurgeon that addresses prenatal conditions. We observed that this multi-disciplinary approach is gaining popularity around the world and we wanted to share our experience and knowledge to other centers.*

3) Could use some editing for sentence structure and wording at times. 4) The "feed and wrap" technique on page 4 line 90 should be briefly described.

*The feed and wrap technique has been described in more detail in the manuscript. Basically the infant is feed and swaddled to soothe the child to obtain advanced imaging with minimal motion artifact while avoiding general anesthesia for sedation.*