



PEER-REVIEW REPORT

Name of journal: *World Journal of Orthopedics*

Manuscript NO: 83224

Title: Clinical Outcomes of Cemented Distal Femur Replacements with All-Polyethylene Tibial Components for Oncologic Indications

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 05319102

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: Iran

Author's Country/Territory: United States

Manuscript submission date: 2023-01-13

Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-14 10:10

Reviewer performed review: 2023-01-23 07:59

Review time: 8 Days and 21 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 Grade E: Do not publish
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
Creativity or innovation of this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation



Scientific significance of the conclusion in this manuscript	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
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 type="checkbox"/> Accept (General priority) <input type="checkbox"/> Minor revision <input checked="" type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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

SPECIFIC COMMENTS TO AUTHORS

Thank you for having allowed me to review this manuscript. “Outcomes of Cemented Distal Femur Replacements with All-Polyethylene Tibial Components for Oncologic Indications” I cannot deny the fact that it is an interesting topic and the authors have conducted an accurate study. Nevertheless, I have serious concerns about methodology of this work. The methodology and statistical analysis related to the title is not proper. General Principle; Consider this; 1-According to the title, I guess you wanted to make a comparison, between; A- with or without All-Polyethylene Tibial Components Cemented Distal Femur Replacements in comparison for Oncologic Indications Or B- Cemented versus non-cemented Distal Femur Replacements with All-Polyethylene Tibial Components for Oncologic Indications You should consider one of the above and compare the odd ratio of different variables (1-implant failure 2- survivorship, rate of all-cause reoperation, and rate of revision 3- implant survivorship or patient demographics between, ...) between these two groups. 2- Consider the following articles. A- Tayara B, Nooh A, Chalopin A, Goulding K, Turcotte RE. Outcomes of Cemented Distal Femoral Replacement Using "Line to Line" Technique With All-Polyethylene



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Tibial Implant for Tumors. J Arthroplasty. 2021;36(8):2913-2920. doi:10.1016/j.arth.2021.03.033 B- Graulich T, Kranz C, Korallus C, Oergel M, Pacha OT, Omar M, Liodakis E, Krettek C, Panzica M. Clinical Outcome After Replacement of Distal Femur/Proximal Tibia in a Heterogeneous Patient Cohort: Function Following Tumour, Trauma, and Loosening. In Vivo. 2021 Jul-Aug;35(4):2275-2281. doi: 10.21873/invivo.12500. PMID: 34182506; PMCID: PMC8286499. It was reported in the title of the outcome. outcome with KSS questionnaires: Knee Society score; MSTs: Musculoskeletal Tumor Society score; TESS: Toronto Extremity Salvage Score; WOMAC: Western Ontario MacMaster questionnaire reviewed. -With what questionnaire do you report the outcome? MATERIALS AND METHODS 3- Patients were then stratified into two groups based on whether the index procedure was a primary reconstruction or a revision of a previous DFR. -why you stratified according to primary reconstruction or a revision surgery? I think "need for revision procedure" is one of your variables. 4-Given the primary purpose of the present study was to characterize early complications and implant longevity in the setting of limb-salvage, functional and patient-reported outcome measures were not collected. If the above sentence is the main finding of your work, then you should change "title", please. Clinical Follow-up 5-please consider these two sentences; A- Patients were then stratified into two groups based on whether the index procedure was a primary reconstruction or a revision of a previous DFR. B-Each patient's clinical course was followed in detail to characterize postoperative complications and the need for reoperations or revision surgery. - Please explain how "need for reoperations or revision" was both stratified and examined as a variable, unless it has subjected to regression analysis at a statistically significant level. 6- Patient Demographics and Operative Variables A- Inclusion criteria were patients aged >18 years old. B- The mean age of the cohort was 50.9±20.7 years (range, 16-88 years). - please explain this bias. Bias 7- I think there are several biases in present work that



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need revision; A) Measurement bias (How did you check the outcome?) B) Procedure bias (Is stratification based on statistical methods?) C) Observer-expectancy bias (interpretation of outcome) D) Selection bias (group comparison between “with or without All-Polyethylene Tibial Components”)



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Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 06157126

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer's Country/Territory: United States

Author's Country/Territory: United States

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Reviewer chosen by: AI Technique

Reviewer accepted review: 2023-01-25 21:00

Reviewer performed review: 2023-01-26 02:09

Review time: 5 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
Novelty of this manuscript	<input type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input checked="" type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No novelty
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Language quality	<input checked="" 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 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
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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

SPECIFIC COMMENTS TO AUTHORS

You state that your minimum followup is 3 months, but you then list the average follow up as 38.8 +/- 54.9 mos (range 0.2 - 208.4 mos). Shouldn't the patient who you only followed for 0.2 mos have been excluded from the study? 10% resulted in soft tissue failure. What were these failures? Were they all dislocation? Anytime you're reporting postop infection in tumor patients, you must consider chemotherapy status. Please include data on whether chemo was given to those who developed postop infection at a higher incidence than those who did not sustain infection.



RE-REVIEW REPORT OF REVISED MANUSCRIPT

Name of journal: *World Journal of Orthopedics*

Manuscript NO: 83224

Title: Clinical Outcomes of Cemented Distal Femur Replacements with All-Polyethylene Tibial Components for Oncologic Indications

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer’s code: 05319102

Position: Peer Reviewer

Academic degree: MD

Professional title: Doctor

Reviewer’s Country/Territory: Iran

Author’s Country/Territory: United States

Manuscript submission date: 2023-01-13

Reviewer chosen by: Ji-Hong Liu

Reviewer accepted review: 2023-03-21 20:54

Reviewer performed review: 2023-03-23 17:21

Review time: 1 Day and 20 Hours

Scientific quality	<input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good <input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish
Language quality	<input checked="" 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 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

Thanks for your answers. I reviewed the answer of the respected authors. The authors' response has been applied in the manuscript. I accept the above manuscript.