

**ESPS Peer-review Report****Name of Journal:** World Journal of Meta-Analysis**ESPS Manuscript NO:** 7647**Title:** Efficacy of therapeutic ultrasound versus sham ultrasound on pain and physical function in people with knee osteoarthritis: A systematic review with meta-analysis of randomized controlled trials.**Reviewer code:** 00505770**Science editor:** Ling-Ling Wen**Date sent for review:** 2013-11-28 09:57**Date reviewed:** 2013-12-12 23:06

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input checked="" type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

**COMMENTS TO AUTHORS**

An interesting meta-analysis.

# ESPS Peer-review Report

**Name of Journal:** World Journal of Meta-Analysis

**ESPS Manuscript NO:** 7647

**Title:** Efficacy of therapeutic ultrasound versus sham ultrasound on pain and physical function in people with knee osteoarthritis: A systematic review with meta-analysis of randomized controlled trials.

**Reviewer code:** 00501315

**Science editor:** Ling-Ling Wen

**Date sent for review:** 2013-11-28 09:57

**Date reviewed:** 2014-02-21 14:51

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A (Excellent)	<input type="checkbox"/> Grade A: Priority Publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B (Very good)	<input checked="" type="checkbox"/> Grade B: minor language polishing	<input type="checkbox"/> Existed	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

# COMMENTS TO AUTHORS

This meta-analysis was used to determine the efficacy of therapeutic ultrasound versus sham for improving pain and physical function immediately post-intervention in people with knee osteoarthritis (OA). The five trials eligible for 276 meta-analysis reported data for a total of 281 participants and OA knees. The meta-analyzed provide that therapeutic ultrasound decreases knee OA pain but it does not improve physical function. So I suggest it is better to revise this manuscript again as the following suggestion. 1.The paper title can be modified as efficacy of therapeutic ultrasound versus sham ultrasound on pain and physical function in people with knee osteoarthritis: A meta-analysis of randomized controlled trials. 2.The previous systematic (2009) on this topic do not agree with this paper research content as well as search strategy, so the meta-analysis depended on the previous retrieve articles plus 2009-2013 retrieved articles maybe have something to explain. 3.No language limit was placed on the search in the text, but English was limited in the abstract. 4.Cohen's unweighted kappa ( $\kappa$ ) was used to interrater reliability in Risk of bias and quality assessment, but the result was linear weighted kappa ( $\kappa$ ). 5.Where is the basis for Chi-square values with  $p \geq 0.1$  and  $I^2 < 60\%$  were considered to be acceptable homogeneity for pooling the data? 6.What is the basis of random effects model? Why did not put forward fixed effects model? 7.Why do you set much stricter inclusion and exclusion criteria? In the result only 5 articles was carried out to meta-analysis. 8.Confidence interval can be removed in the line 322. 9.This sentence that pooling the three studies 348 administering high dose ultrasound versus sham ultrasound yielded an



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insignificant decrease in pain may be incorrect, as P value was 0.06 in the line 348-351. 10.The three wire table also has some problems in drawing. 11.The above nine articles to do funnel have practical significance, but only five papers included in the study in figure 2. 12.Analysis software better using Stata.