

## PEER-REVIEW REPORT

**Name of journal:** *World Journal of Orthopedics*

**Manuscript NO:** 76690

**Title:** The Effect of Pelvic Fixation on Ambulation in Children with Neuromuscular Scoliosis

**Provenance and peer review:** Unsolicited Manuscript; Externally peer reviewed

**Peer-review model:** Single blind

**Reviewer's code:** 03582196

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Director, Professor

**Reviewer's Country/Territory:** China

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-03-29

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-04-11 03:55

**Reviewer performed review:** 2022-04-18 06:38

**Review time:** 7 Days and 2 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 Grade E: Do not publish
Language quality	<input type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input checked="" 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 checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<b>Peer-reviewer statements</b>	Peer-Review: <input checked="" type="checkbox"/> Anonymous <input type="checkbox"/> Onymous Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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## SPECIFIC COMMENTS TO AUTHORS

The present study included a retrospective review of patients with NMS underwent PSF with fixation that incorporated the pelvis to determine whether PSF with pelvic fixation using iliac or SAI screws in ambulatory NMS patients affects postoperative ambulatory ability. A total of 118 patients were enrolled into the study, including 11 ambulatory patients, and found that it is safe for ambulatory patients with NMS to undergo PSF incorporating the pelvis using modern constructs and spinal fusion to the pelvis in ambulatory patients with NMS provides effective deformity correction without compromising ambulatory capabilities. This study is the second evaluation of this treatment method and the results have some significance. In term of this, the manuscript is acceptable, However, several minor revisions are needed. 1. the number of patients with different diagnosis is 119, why not 118? 2. The first appearance of MCM and PO in Line 75 should be fully defined. 3. The results part is not clearly displayed especially when comparing the total change of MCM and PO between the ambulatory and non-ambulatory groups in Line 83 and complication part in Line 88. TABLE is better.

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**Reviewer's code:** 05142913

**Position:** Peer Reviewer

**Academic degree:** Doctor, MBBS

**Professional title:** Doctor

**Reviewer's Country/Territory:** Saudi Arabia

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-03-29

**Reviewer chosen by:** AI Technique

**Reviewer accepted review:** 2022-05-03 01:45

**Reviewer performed review:** 2022-05-13 17:13

**Review time:** 10 Days and 15 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
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 type="checkbox"/> Major revision <input checked="" type="checkbox"/> Rejection
Re-review	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No



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<b>Peer-reviewer statements</b>	Peer-Review: [ <input checked="" type="checkbox"/> ] Anonymous [ <input type="checkbox"/> ] Onymous Conflicts-of-Interest: [ <input type="checkbox"/> ] Yes [ <input checked="" type="checkbox"/> ] No
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## **SPECIFIC COMMENTS TO AUTHORS**

No sufficient evidence

## RE-REVIEW REPORT OF REVISED MANUSCRIPT

**Name of journal:** *World Journal of Orthopedics*

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**Reviewer's code:** 05142913

**Position:** Peer Reviewer

**Academic degree:** Doctor, MBBS

**Professional title:** Doctor

**Reviewer's Country/Territory:** Saudi Arabia

**Author's Country/Territory:** United States

**Manuscript submission date:** 2022-03-29

**Reviewer chosen by:** Li-Li Wang

**Reviewer accepted review:** 2022-07-12 02:37

**Reviewer performed review:** 2022-07-12 02:41

**Review time:** 1 Hour

<b>Scientific quality</b>	<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
<b>Language quality</b>	<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
<b>Conclusion</b>	<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
<b>Peer-reviewer</b>	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**

The manuscript is original with a long retrospective period. However, can you please define how primary and secondary outcomes were identified.