



## PEER-REVIEW REPORT

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

**Manuscript NO:** 83262

**Title:** Return to Sport following Toe Phalanx Fractures: a Systematic Review

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

**Peer-review model:** Single blind

**Reviewer's code:** 03372482

**Position:** Editorial Board

**Academic degree:** MD, PhD

**Professional title:** Academic Research, Assistant Professor, Associate Professor

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

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

**Manuscript submission date:** 2023-01-15

**Reviewer chosen by:** Geng-Long Liu

**Reviewer accepted review:** 2023-02-16 07:01

**Reviewer performed review:** 2023-02-16 07:22

**Review time:** 1 Hour

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| <b>Scientific quality</b>                          | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| <b>Novelty of this manuscript</b>                  | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty   |
| <b>Creativity or innovation of this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |



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|---|--|
| <b>Scientific significance of the conclusion in this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No scientific significance   |
| <b>Language quality</b>   | <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 |
| <b>Conclusion</b>   | <input type="checkbox"/> Accept (High priority) <input checked="" type="checkbox"/> Accept (General priority)<br><input type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection          |
| <b>Re-review</b>  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No  |
| <b>Peer-reviewer statements</b>                                     | Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous  |
|   | Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No   |

**SPECIFIC COMMENTS TO AUTHORS**

Thirteen studies were included: one retrospective cohort study and twelve case series. Seven studies reported on acute fractures. Six studies reported stress fractures. For the acute fractures (n=156), 63 were treated with primary conservative management (PCM), 6 with primary surgical management (PSM) (all displaced intra-articular (physeal) fractures of the great toe base of the proximal phalanx), 1 with secondary surgical management (SSM) and 87 did not specify treatment modality. For the stress fractures (n=26), 23 were treated with PCM, 3 with PSM, and 6 with SSM. For acute fractures, RRS with PCM ranged from 0 to 100%, and RTS with PCM ranged from 1.2 to 24 weeks. For acute fractures, RRS with PSM were all 100%, and RTS with PSM ranged from 12 to 24 weeks. One case of an undisplaced intra-articular (physeal) fracture treated conservatively required conversion to SSM on refracture with a return to sport. For stress fractures, RRS with PCM ranged from 0 to 100%, and RTS with PCM ranged from 5 to 10 weeks. For stress fractures, RRS with PSM were all 100%, and RTS with surgical management ranged from 10 to 16 weeks. Six cases of conservatively-managed stress fractures required conversion to SSM. Two of these cases were associated with a



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prolonged delay to diagnosis (1 year, 2 years) and four cases with an underlying deformity (hallux valgus (n=3), claw toe (n=1)). All six cases returned to the port after SSM. CONCLUSION: The majority of sport-related toe phalanx fractures (acute and stress) are managed conservatively with overall satisfactory RRS and RTS. For acute fractures, surgical management is indicated for displaced, intra-articular (physeal) fractures, which offers satisfactory RRS and RTS. For stress fractures, surgical management is indicated for cases with delayed diagnosis and established non-union at presentation, or with significant underlying deformity: both can expect satisfactory RRS and RTS. In General: it's a good paper and the subject of the manuscript is applicable and useful. Title: the title properly explains the purpose and objective of the article Abstract: abstract contains an appropriate summary for the article, the language used in the abstract is easy to read and understand, and there are no suggestions for improvement. Introduction: authors do provide adequate background on the topic and reason for this article and describe what the authors hoped to achieve. Results: the results are presented clearly, the authors provide accurate research results, and there is sufficient evidence for each result. Conclusion: in general: Good and the research provides sample data for the authors to make their conclusion. Grammar: There are a lot of grammatical errors. This must be taken care of and addressed. . (Check The Paper Comments). Finally, this was an attractive article. In its current state, it adds much new insightful information to the field. Therefore, I accept that paper to be published in your journal.



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**Academic degree:** MD

**Professional title:** Lecturer, Surgeon

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

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

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**Reviewer chosen by:** Geng-Long Liu

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| <b>Scientific quality</b>                          | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Very good <input type="checkbox"/> Grade C: Good<br><input type="checkbox"/> Grade D: Fair <input type="checkbox"/> Grade E: Do not publish |
| <b>Novelty of this manuscript</b>                  | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No novelty   |
| <b>Creativity or innovation of this manuscript</b> | <input type="checkbox"/> Grade A: Excellent <input checked="" type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair<br><input type="checkbox"/> Grade D: No creativity or innovation                                |



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

**SPECIFIC COMMENTS TO AUTHORS**

Thanks for giving me the opportunity to review this interesting manuscript that aimed to systemically review all studies recording return to sport following toe phalanx fractures (both acute fractures and stress fractures), and to collate information on return rates to sport (RRS) and mean return times (RTS) to sport. Methods. Please change PubMed to PubMed Table 1 records the inclusion and exclusion criteria(12). Please remove the reference number The QUOROM Process for the review is illustrated in Figure 1(12). Please remove the reference number The definitions used for RRS and RTS, for both conservative and surgical management, were those previously described by Robertson et al. Please explain the definitions and add a reference. and as previously used by Robertson et al(14): Please remove this sentence The included studies are observational or non-randomized studies. In addition to modified Coleman Methodology Score, Please assess the risk of bias using the Methodological index for non-randomized studies (MINORS) score using the intra-class correlation co-efficient statistic: Please mention the software used to calculate the ICC in the statistics section. Please add more subheadings in the methods section such as data extraction, outcome



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**https://**[www.wjgnet.com](http://www.wjgnet.com)

measures, etc Results. Toe Phalanx Fractures: Do not capitalize first letters Of the 26 stress fractures recorded, follow-up data was available for all 26 (100%): please remove Of the 26 stress fractures recorded" as it is repeated and re-write the sentence 3.5 Study Design: please move to the beginning of the results and change to "Quality of the included studies." 3.9 Return Times to Sports: This is the main outcome of the study. However, the authors did not mention any paragraphs with details. They just mentioned " Look table 4 and figure 3". which is not appropriate. Please rewrite all this part in details and write some paragraphs after each subtitle and at the end of the paragraph you can say, :look table 4 and figure. Tables. Tables says Coleman Score, do you mean modified Coleman Score? Overall, the paper is very well conducted and can be published after these modifications,