

Reply to editor	<p>Authors are required to provide standard three-line tables, that is, only the top line, bottom line, and column line are displayed, while other table lines are hidden. The contents of each cell in the table should conform to the editing specifications, and the lines of each row or column of the table should be aligned. Do not use carriage returns or spaces to replace lines or vertical lines and do not segment cell content. Please upload the approved grant application form(s) or funding agency copy of any approval document(s).</p>	<ol style="list-style-type: none"> <li>1. We changed the content of the form, revised the form according to the editor's comments, and submitted the form. The reference as shown in Table 1.</li> <li>2. We re-polished the language and uploaded the polishing report, the modified part after polishing has been marked in red, and the modified and added content in the article is marked in orange.</li> </ol>
Review1	<ol style="list-style-type: none"> <li>1. The article needs some modifications The language and spelling need significant improvement.</li> <li>2. Pathogenesis The word talocalus has been used - please correct The title of the article states acute talofibular ligament injury , however there is a lot of information regarding chronic injury The recommendations need to be clear regarding the management of acute talofibular ligament injury It would be informative to add the definition and time frame that can be referred to acute talo fibular ligament injury The outcome for non-operative treatment, and indications for surgical management,</li> </ol>	<ol style="list-style-type: none"> <li>1. We reorganized the language and checked spelling.</li> <li>2. <ol style="list-style-type: none"> <li>(1) We have corrected the word, used the correct vocabulary. The reference as shown in Page 5, Paragraph 3, Sentence 1.</li> <li>(2) And deleted the part about chronic injury, focus on the treatment and management measures for acute ATFL injury.</li> <li>(3) We have added the definition. And we added time frame in the ATFL</li> </ol> </li> </ol>

	<p>need to be clearly mentioned to ensure a simple clear message to the average reader.</p> <p>3. The discussion and conclusion could be modified to give a clear message regarding acute injury patterns and its management. The article needs to highlight the evolution of evaluation and management of the acute injury.</p>	<p>management, The reference as shown in Page 4, Paragraph 1, Sentence 4. And Page 6, Paragraph 3, Sentence 2.</p> <p>(4) We have elaborated the outcome for non-operative treatment, and indications for surgical management, the reference as shown in Page 16, Paragraph 2.</p> <p>3. we have elaborated the acute injury patterns and its management. The reference as shown in the Table file and Page 11, Paragraph 4. we have highlighted the evolution of evaluation and management of the acute injury. And we modified the conclusion. The reference as shown in Page 6, Paragraph 3. And Page 11, Paragraph 4.</p>
Review2	<p>1. Throughout the manuscript you refer to the use of anti-inflammatory drugs for acute pain relief in this type of injury, in addition to referring to the PRICE protocol. I should point out that the most common guideline for the treatment of acute injuries today is the PEACE&amp;LOVE protocol in which each letter refers to a recommendation, as does the PRICE</p>	<p>1. We revised the focus of conservative treatment, and we have added the definition of the PEACE&amp;LOVE protocol and elaborated to it in detail. We corrected claims about anti-inflammatory and pain-relieving medication and the reference as shown in Page 12, Paragraph 2-4.</p>

	<p>protocol. In this more up-to-date protocol, they emphasise the recommendation not to use anti-inflammatory or pain-relieving medication, so you should reflect this in your manuscript. In addition, I suggest that you detail this updated protocol in your manuscript.</p> <p>2. On the other hand, they should include that one of the advantages of ultrasound is that it has no detrimental effects on the patient, as MRI or CT can have.</p> <p>3. They also refer to traditional Chinese medicine and in this section they should be careful, as in some regions this type of medicine is not recognised by researchers and health professionals.</p> <p>4. Finally, in my opinion, in order to overcome any type of ligament injury and instability, these types of injuries must be worked on with proprioception and if they are lower limb injuries, they must be subjected to loading. Therefore, they should refer to proprioception as a</p>	<p>2. We have added the advantages of ultrasound that it has no detrimental effects on the patient, as MRI or CT can have. The reference as shown in Page 8, Paragraph 3, Sentence 5.</p> <p>3. We have elaborated on the characteristics of traditional Chinese medicine and the reasons for quoting and applying it, and have expressed our views rigorously. The reference as shown in Page 15, Paragraph 3.</p> <p>4. We highlight therapeutic approaches to proprioception training and the content of proprioception as a fundamental part in recovery from ATFL injuries and must be subjected to loading. The reference as shown in Page 14, Paragraph 1, Sentence 1 and Sentence 3-5.</p>
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	<p>fundamental part of the recovery process.</p>	
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