

Reviewer #1:

Scientific Quality: Grade C (Good)

Language Quality: Grade A (Priority publishing)

Conclusion: Minor revision

Specific Comments to Authors: Dear authors, We have read with interest your manuscript relating a case report and review of the literature. The manuscript is clear and well presented, with well described problematics. It presents an important insight about the difficulties to deal with delayed infection, which is of prime importance for practitioners. In our understanding, the main information of the manuscript is the recommendation and guideline for re-intervention, taking into account all the data and analyses (that are often not clear and easy to interpret). The title of the manuscript describe a case report and a review of the literature : the case report is very well documented, but the review of literature is less obvious and is mainly used for the discussion section. The Background/Introduction section presents the problematics of Surgical wound dehiscence and surgical site infection, but lacks of literature survey, especially for up-to-date recommendations for SWD treatments. The manuscript would be strengthened by improving this aspect in the Introduction, and by adding some objectives of the work (i.e actualized recommendations for SWD management in case of delayed SSI). In the same idea, by improving the literature survey, the conclusion section could include some propositions of pragmatic recommendation that would be of very interest for clinicians. Remark about units (SI) : the CRP value is presented as mg/dl, which is meaningful for clinicians, but might be expressed as nmol/L to respect the requirements of use of SI units

- We have added recent commonly accepted treatment guidelines in the 'Introduction' section along with pragmatic recommendations for chronic surgical wound dehiscence in the 'Conclusion' section.
- We appreciate your advice on CRP value.

Reviewer #2:

Scientific Quality: Grade B (Very good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Accept (General priority)

Specific Comments to Authors: It is a well-written case report on surgical site infection and surgical wound dehiscence.

1. How was the patients' blood glucose level controlled after flap surgery?

- We requested strict blood glucose control to the endocrinology department, and his blood glucose level was usually between 130 and 190 mg/dL. He was taking metformin, glimepiride, along with insulin shots.

2. Ciprofloxacin was chosen by experience or drug sensitivity test?

- It was chosen based on a drug sensitivity test because it does not have any cross-activity with piperacillin/tazobactam.

3. Figure 3B: the suspicious soft tissue phlegmon and interspinous reconstruction wire should be marked in the picture.

- The suspicious soft tissue phlegmon is marked with white arrows.

4. Language editing would be helpful to improving the quality of this case report.

- We have received additional language editing.

Reviewer #3:

Scientific Quality: Grade C (Good)

Language Quality: Grade B (Minor language polishing)

Conclusion: Minor revision

Specific Comments to Authors: Comments on: "Reconstruction of the Lower Wound with Delayed Infection after Spinal Surgery: A Case Report and Review of the Literature"

1. Please explain common post surgery infections and their treatment methods in the introduction section.

- We have explained the current treatment methods in the Introduction section, line 68-74.

2. It is better to use more recent references in the manuscript.

We have tried to use more recent references during the revision.

3. Please add labels A and B to Figure 3.

- We added labels A and B to Figure 3 in the upper-left corner.

4. Please add a abbreviations' list.

- We have added an abbreviations' list as Table 1.