



Barts Health
NHS Trust

Monday, January 14,

MD,MSc,cPhD Tzatzairis Themistoklis
Senior Fellow in Pediatric Orthopaedic
Pediatric Orthopaedic Department
Royal London Hospital
Barts NHS Trust
Whitechapel Rd,
Whitechapel,
London E1 1BB
Themistoklis.Tzatzairis@bartshealth.nhs.uk
Mobile: +44-7923301764

Dear Editor and Reviewers,

We really appreciate it, that you gave us the opportunity to (major) revise our manuscript and re-submit it. We would like to re-submit the following manuscript with title:

“Adolescent Lisfranc injury treated with TightRope™ : Case report and literature review”

for your consideration for publication in World Journal of Orthopedics. The manuscript has been approved by all authors and has never been published, or under the consideration for publication elsewhere.

The next table includes all the changes/corrections that have been made to the manuscript after considering reviewers' comments.

Reviewer ID	Comment	Answer
03727329	<p><i>Could you please describe more on the surgical technique and the results of the TightRope technique deccribed for cases in adults's Lisfranc injuries.</i></p>	<p>Thank you for your comment. A more detailed description has been added and results from current literature have been analysed (lines 272-293).</p>
	<p><i>Could you please describe percisely, how you treated such childrens cases in the past? Did you see some differences at the folow-up? Could you present this within the manuscript? Could describe the outcome and the prognosis of a conservative treatment of such case. The readers needs a more clear understanding of such rare case in childrens!</i></p>	<p>Previous experience and outcomes have been added to manuscript (lines 297-303).</p>
	<p><i>The literature review is uncomplete, please provide more informations on the treatment options and its results and complications.</i></p>	<p>More articles included in our manuscript (lines 304-317) in order to provide more information in terms of treatment/results/complication.</p>
02699644	<p><i>In the abstract you state that there have been no other publications on this injury in childhood but this is not correct, "bunk bed" injury is well described in the USA, and others have reported this problem (Google search). This may be the only "tight rope" fixation in this age group reported in the literature but it is used not infrequently in general orthopaedic practise. As a case report this does adequately describe the use of this type of fixation however what are the long term results and in particular the ability of this device to maintain correction in the long term, at least to 12 months? Without this information I believe that it would be premature to publish such a case report.</i></p>	<p>Thank you for your comments. Phrase changed to limited published data. However, this is the first described Lisfranc injury in a child treated with this method. We would be more than happy to publish a case-series with more cases treated with the same technique and of course with longer follow-up. At this moment our aim is to open the way for further research using this technique for ligamentous Lisfranc injuries in children.</p>

<p>02444795</p>	<p><i>Please do not use abbreviated words such as "it's" in the first line of the abstract. Punctuation needs to be tightened up. Comment is also required on the varying levels of severity of Lisfranc injury eg divergent type. More detailed comment is required on where the technique described would not be appropriate or where it would have to be augmented. Please comment on accepted factors that can affect outcome age initial instability, quality of reduction, etc</i></p>	<p>Thank you very much for your comments. Manuscript edited accordingly and a brief presentation of the classification system has been included (lines 152-159). Additionally, Table 1 has been added.</p>
<p>03478404</p>	<p><i>This paper reports on the first published case of a child with Lisfranc injury, treated with TightRope device. The manuscript is well written and interesting. References are pertinent. Figures are of good quality and illustrative. The paper deserves to be published, as it introduces a new, apparently better technique, in children. Some comments/suggestions in order to improve the manuscript: 1. Title: a. Contains more than 12 words; please correct. B. Abbreviations (y.o.) should not be used in the title.</i></p>	<p>Thank you for you comments. Title edited.</p>
	<p><i>2. Please correct "Corespodance to".</i></p>	<p>Corrected</p>
	<p><i>3. Abstract: a. Please do not use "it's", but "it is". b. Different treatment options have been described'; please delete ' at the end.</i></p>	<p>Edited</p>
	<p><i>4. Key words: each has to start with a Capital letter</i></p>	<p>Corrected</p>
	<p><i>5. Paragraph "Introduction": a. line 132: please replace "Jacques" with Lisfranc, which is his family name b. line 152: Please insert diagnosis and delete "cases" in: "The rate of delayed cases is up to 24%" c. line 154: please replace "there is" with "there are" (data = plural) d. line 160: please write "TightRope" e. line 168: please write</i></p>	<p>Edited and corrected. Grammatical and lexical errors corrected</p>

<p><i>“did not” instead of “didn’t” f. from line 169: “and thus, our search was narrowed down only in adults’ injuries. - to line 179: the text should be used in “Discussion”. g. Lines 180-181 are somewhat repeated at the end of Discussion and in the Conclusion. They should be removed from Introduction. h. Instead, Introduction should end with “Herein, we present the first case of ….”</i></p>	
<p><i>6. Paragraph “Discussion”: a. I suggest starting with lines 245-48: “To the best of our knowledge…” b. The authors could discuss why they decided to use this technique. c. The title mentions that this is also a literature review. Also, the Core Tip states that “A mini literature review is been discussed as well.” But, in fact, there is no proper review of the literature. Therefore, I would suggest showing all these data. The authors wrote (line 235) – “There are few studies of Lisfranc injuries in children”; they should be detailed in a table, including the treatment options, results, follow-up etc Also, data in adults should be detailed in another table (studies that were presented briefly in the Introduction).</i></p>	<p>Edited accordingly. Table 2 have been added in order to present the current literature</p>
<p><i>7. References: should be written according to the required style of the journal.</i></p>	<p>Edited</p>

Thank you for your comments once again.

Yours Sincerely,

The authors