## Reviewer \#1:

Scientific Quality: Grade B (Very good)<br>Language Quality: Grade B (Minor language polishing)<br>Conclusion: Major revision<br>Specific Comments to Authors:

1. The inclusion criteria should better be described objectively by IMA / HVA measurement.
2. The hypermobility of 1st TMT as Lapidus procedure's indication, should be included and described in materials/methods
3. What were the disadvantages of this technique? Please explain in results and discussion

## Answers to Reviewer

1. The inclusion criteria for patients were as follows: symptomatic moderate or severe HV according to the traditional radiographic classification[12] (hallux valgus angle (HVA) $\geq 20$ degrees or intermetatarsal angle (IMA) $\geq 11$ degrees); pain under the heads of the second or second-third metatarsals (M2, M3); hammer toe deformity; Tailor's bunion; and no previous surgical intervention.
HVA was prioritized over IMA for the inclusion of patients. According to the HVA, 20 (66.7\%) feet had moderate HV (HVA 20-40 degrees), and 10 (33.3\%) had a severe deformity (HVA $\geq 40$ degrees). All feet, except for two, had an IMA $>10$ degrees. In the two exceptions, the IMA was 10 degrees, but the HVAs were 25 and 28 degrees.
2. The criteria for determining hypermobility of the first tarsometatarsal joint as an indication for the Lapidus procedure are still controversial[13]. We chose the Romash classification[14] (types I and II) because, in our opinion, it is more independent and accurate than the other methods due to the use of X-rays in the assessment. There were 21 (70\%) feet classified as Romash Type I and 9 feet classified as Type II (30\%).
3. One of the disadvantages of our technique was the need to use an intraoperative corrective device, which slightly increased the overall duration of the procedure. Another disadvantage was the complexity of the surgical treatment, as the invasiveness of the procedure led to an increase in the inpatient length of stay for individual patients (mean 5.8 days, $\mathrm{SD} \pm 2.43 ; 12$ days in two patients).
