Author's response to reviews

Title: Anterolateral approach with tibial tubercle osteotomy versus standard medial approach for primary total knee arthroplasty: does it matter?

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Author's response to reviews:

Dear Mr. Rossi,

Thank you very much for the helpful reviewer`s feedback and suggestions. We made the following changes in response to the reviewer`s suggestions.

The final manuscript has been seen and approved by all authors and they have taken due care to ensure the integrity of the work. We declare that all authors have contributed to the paper and are familiar with the contents of the final draft. We hereby affirm that the submitted manuscript is our original work, has not been published or is being considered for publication elsewhere. There is no conflict of interest. Looking forward to hearing from you at your earliest convenience I remain,

Best regards, yours sincerely,

Michael T. Hirschmann, MD
Head of Research

Dear Reviewers,

thank you very much for your valuable suggestions and feedback We really appreciate your effort aiming to improve our manuscript.

Reviewer: Jose C Alcerro
Reviewer's report:
Major Compulsory Revisions
Methods
I believe it would be relevant to describe what the distribution of surgical procedures among centers was considering this is a multicenter study. We entirely agree and the necessary information was added.
Was there any specific consideration to perform or avoid patellar resurfacing? In our hospital and the other study centers we do not routinely resurface the patella in primary total knee arthroplasty. Current literature concerning this issue is conflicting. Some authors believe that the patella need to be resurfaced others do not.

For example


Results

When comparing operation time the results showed there was a significant difference between TubOT and MPA. Was there a significant difference between surgeons performing the procedure?

We did not investigate the difference between surgeons in our studies and thus I unfortunately cannot comment on this fact.

Considering a previous surgical intervention affects the integrity of all tissues. Where these previous surgeries taken into account when assessing postoperative outcomes?

Indeed, we entirely agree, that this is an important point. In our results we did not find a difference in the number of previous surgeries between both groups. Please see first paragraph result section.

Discussion

In making reference to your results were no difference was found in prosthetic or mechanical alignment between groups you compare with the results of a 12% error rate found with a minimally invasive procedure. Considering exposure achieved between these procedures is different, I wouldn’t deem appropriate to compare one another.
We deleted this paragraph accordingly.

When mentioning the complication of the MPA you attribute as the probable cause of anterior knee pain an altered patellar tracking as a consequence of the surgical approach. Was this patient resurfaced? Could this complication be attributed to how the patella was managed initially?
No primary resurfacing of the patella was performed.

Tables
In the presentation of results in the tables 1 and 3, what does the + stand for? (SD, SE …)
Please apologize- we clarified the tables (mean±standard deviation)

Minor Essential Revisions

Discussion
“However, compared to others the operation time of the present study using the parapatellar lateral approach including tibial tubercle osteotomy, is comparable and to some reported minimal invasive approaches even lower.” This phrase should be reviewed for writing.
Deleted.

Figures
It would be important to reference the figures along the manuscript to guide the reader on the instruments and approach utilized.
As far as I understand the comment this has already been done in the manuscript reviewed.

Discretionary Revisions
Line numbering would be ideal for an easier way to reference all comments to the manuscript
We entirely agree but it does not conform with the instructions to authors.

Reviewer: Bjorn Burian
Reviewer’s report:

Minor Essential Revisions
1. Abstract
Please note the tests which had been used for statistical analysis.
We added the suggested information.
„The Wilcoxon two sample test (two-sided) was used to investigate differences of patients between group A and B pre- and postoperatively. The paired t-test was
used to evaluate differences over course of time within each group. For comparison of radiological alignment a Chi2-test was performed.

2. Discussion
Please clarify the third last sentence: during investigation time of 2 Years
We clarified the paragraph in question.

3. Legends
Please shorten the legends.
Done as suggested.

4. Figures
Table 1 + 3 + 4 - please optimize / correct the formatting and Orthography
Done as suggested.

Discretionary Revisions
1. Results
Please relocate the sentence (The pre- and postoperative mechanical alignment in both groups is presented in table 2.) after the sentence ( had a valgus laxity of <5%).
Done as suggested.

2. Conclusion
Please complete: longer time of operation in group A
Added as suggested.

General comments:
Please check to make sure all abbreviations are spelled out first, example: body mass index, kg/m2 (BMI) and visual analog scale (VAS).
Changed as suggested.