Author's response to reviews

Title: Substitutes of structural and non-structural autologous bone grafts in hindfoot arthrodeses and osteotomies: A systematic review

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Author's response to reviews: see over
Response to Reviewers

Reviewer #1

I have no revisions to suggest.

Thank you very much.

Reviewer #2

Major Compulsory Revisions

Page 6: Line 1: The authors state that the scale was ‘adopted and modified’
please explain why this was absolutely necessary and what was modified. Else
use the quality assessment scale as presented in literature should be used, since
modified scales are difficult to compare.

Thank you for this important comment. In fact, we did not truly modify the Newcastle -
Ottawa scale (NOS) for the assessment of non-randomized studies. We used exact the same
criteria described by this scale. However, in the Newcastle Ottawa scale system, these criteria
are further summarized in three categories, i.e. “selection”, “comparability” and “outcome”.
For each of these categories, stars can be allotted to summarize the overall study quality. A
maximum of two stars can be allotted to “comparability”. Four stars can be given for
“selection” and three for “outcome”, respectively. This star rating system was not used in our
manuscript submitted for review. Nevertheless, in order to be compliant with the original
NOS, we have now introduced star rating system in our revised manuscript:

“The Newcastle-Ottawa Quality assessment scale [48] was used for the quality
assessment of non-randomized studies. In this context, the included studies were
evaluated according to three main categories, i.e. “selection”, “comparability” and
“outcome”. Each of these categories comprised several evaluation criteria: Within the
category “selection”, each study was assessed regarding the representativeness of the (1)
exposed and the (2) unexposed study cohort and (3) the ascertainment of exposure to the
surgical procedure and graft of interest. It was also verified whether (4) the outcome of
interest was absent at the beginning of the study. Within the category “comparability”, it was assessed if the study controlled for confounding variables. Within the category “outcome”, each study was tested for (1) blinded or record linked outcome assessment and (2) completeness of follow-up (i.e. a documented follow-rate ≥ 80%). It was also assessed if (3) the follow-up time was long enough to detect the outcome of interest.

As a final summary, stars were allotted to each of the three main categories with each star representing a fulfilled evaluation criterion. A maximum of two stars could be allotted to the category “comparability”.

... 

Page 8, Line 18: Please check I the word ‘allograft’ should be ‘autograft’ in this sentences, as now two times odds for non-structural allografts are presented in this paragraph.

Your comment is absolutely right. The sentence refers to autologous grafts. The wording was changed accordingly. We apologize for this mistake.

Tables 1 and 2: The tables are difficult to read please redesign them such that most important items can be directly seen, not all data presented are relevant for your study goal.

The tables were significantly shortened. One column was omitted and the results sections were further structured towards the study goal. Moreover, the star rating system of the Newcastle Ottawa scale was introduced to improve legibility.

Minor Essential Revisions

Page 4, Line 13: ‘tantatalum’ should be ‘tantalum’

The spelling was corrected. We apologize for this mistake.

References were added for both statistical analyses.

Throughout the text please use one term for autograft / autologous graft and one term for allograft / substitute

Thank you for your comment. We fully agree that using different words for the same term can be confusing. In the modified manuscript, “autograft” was replaced by ” autologous graft”.

The word „substitute” is used as an umbrella term for allografts and synthetic grafts.

• Discretionary Revisions

• Page 6, Line 17: consider to start new section ‘Results’ at this point

We agree that including the results of the literature search in the results section may improve the clarity of the manuscript. We have modified the manuscript accordingly.