Reviewer’s report

Title: Delayed surgical treatment for a traumatic bilateral cervical facet joint dislocation using a posterior-anterior approach

Version: 2 Date: 26 August 2012

Reviewer: Bernhard Schmidt-Rohlfing

Which of the following best describes what type of case report this is?: Unexpected or unusual presentations of a disease

Has the case been reported coherently?: Yes

Is the case report authentic?: Yes

Is the case report ethical?: Yes

Is there any missing information that you think must be added before publication?: Yes

Is this case worth reporting?: Yes

Is the case report persuasive?: No

Does the case report have explanatory value?: Yes

Does the case report have diagnostic value?: No

Will the case report make a difference to clinical practice?: Yes

Is the anonymity of the patient protected?: Yes

Comments to authors:

This is interesting paper about an old fracture dislocation of the lower C spine. This is certainly a very rare case. Nowadays the treatment of choice of those fracture dislocations is reduction and stabilization at an early stage.

Several questions remain open. First of all, what is the indication for a combined posterior anterior fusion / instrumentation? In general, an anterior stabilization is regarded to be sufficient. I understand that an open reduction from posterior was required to overcome the locked facet joints. Was this the main reason for the dorsal instrumentation? Or were there major concerns about the stability in case of a purely anterior stabilization? The decision should be discussed in view of the most recent data from the literature.

It is highly unusual to perform a dorsal unilateral instrumentation. This was done
because the insertion of the lateral mass screws on the right hand side failed. Therefore, the authors should address the question what the benefit of a unilateral instrumentation is. In addition, looking at the a.p. view of the postop films there is some concern about the correct positioning of the lateral mass screws. Have the screws been checked with a CT scan?

The authors should also comment on the initial decision to perform a non-operative treatment. In view of the expected instability and the potential damage to the spinal cord it might be worthwhile to present the precise arguments for a conservative treatment option.

Looking at the references the more recent literature should be considered.

Finally, the authors should seek the help of a native speaking colleague.

**Quality of written English:** Needs some language corrections before being published

**Declaration of competing interests:**

I declare that I have no competing interests.