Reviewer's report

**Title:** Developing an Evidence-Based Clinical Pathway for the Assessment, Diagnosis and Management of Acute Charcot Neuro-Arthropathy: A Systematic Review

**Version:** 1  **Date:** 21 May 2013

**Reviewer:** joanne mcardle

**Reviewer's report:**

**Major Compulsory Changes**

I think this is of a high standard, thorough, comprehensive and well reported review. My main overall comment is that I was expecting at the end there would be an actual pathway that was developed in response to the evidence. By this I mean we would see the translation of theory/evidence into clinical purpose. I think this would be valuable.

I also would liked to have seen some grading of the evidence so we were aware which was RCT for example and which was case study. Again this would allow the reader to differentiate on the evidence around.

**Minor essential revisions**

1. Cast changes are mentioned a couple of times as 1-2 times weekly. Is this evidence or recommendation?
2. Education in those patients to optimise compliance. Is there any evidence to support this or is it an opinion?
3. Optimising diabetes control. Are the authors inferring that this will assist in speeding up CN consolidation? Again, evidence for this?
4. Why 3 monthly follow-up reviews in these patients? Why not 2 monthly for example?
5. In surgical intervention. Is the surgery the authors refer to reconstruction of the foot or amputation? These are very different outcomes and is there any evidence for success rates in surgical interventions? Negative and positive is crucial
6. Diagnosis is missed in 79% of patients. This should maybe be highlighted in the discussion that indicates a gap in professional education?

**Level of interest:** An article of outstanding merit and interest in its field

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.
Declaration of competing interests:

I declare that I have no competing interests