Reviewer's report

Title: Platelet-rich plasma (PRP) versus autologous whole blood for the treatment of lateral elbow epicondylitis: a randomized clinical trial

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Reviewer: Michael Carmont

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Platelet rich plasma versus autologous whole blood for the treatment of lateral elbow epicondylitis: a randomized clinical trial.

The authors present a randomized controlled study for the treatment of lateral epicondylitis were patients received either an injection of PRP or whole blood. VAS, PPT and Mayo scores improved in both groups at 4 weeks however there a significant continued improvement at 8 weeks.

General comments:
I enjoyed reading this well written paper. I have no methodological concerns apart from the short duration of follow up. Comparable papers have followed their patients up until 6 months. The longest duration of outcome follow up is 8 weeks which is really short term. The lack of long-term follow up would be a cause for rejection. One of the strengths of this paper is that the authors have gone to the trouble to have the actual contents of the PRP in the study groups determined.

I do have a few minor changes that I feel should be implemented before the paper is accepted.

The introduction is good. The word we is used in the final paragraph and this should be changed to the passive verse and this should be adopted throughout the manuscript.

Methods:
Line 105 “physical medicine….educational hospital” can be exchanged for our unit.
Line 124 the English can be changed to gave written consent for inclusion in the study.
Line 128 The process…freely can be omitted.

Results: no recommendations.

Discussion: this is well structured and covers the pertinent literature.

A few minor typos L324 cosrticosteroids, then RCTs. Thanasaas I feel there is something missing here.

L331 the L can be removed so that it just reads Creaney et al.

L344 similarly Best rather than Thomas M Best.
The conclusions are one of the weak areas of this paper. L375-382 are discussion points rather than conclusions and this section should be kept as conclusions.