Editor

We appreciate your review of our manuscript “Clinical characteristics and role of whole body bone scan in multifocal osteonecrosis”. In response to your comments, we have performed the necessary clarifications, as summarized below.

1. In the abstract and main manuscript, please change the heading “Introduction” to “Background”.

   Answer: We have changed “Introduction” to “Background”.

2. Please change the heading “Key indexing terms” to “Keywords”.

   Answer: We have changed “Key indexing terms” to “keywords”.

3. Please change the heading “Materials and Methods” to “Methods”.

Author’s response to reviews

Title: Clinical characteristics and role of whole body bone scan in multifocal osteonecrosis

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Author’s response to reviews:

19 December 2018

Point-by-point response to the editor and reviewer’s comments
Answer: We have changed the term “Materials and Methods” to “Methods”.

4. Please do not report p values as 1, use >0.99 or similar.
Answer: We have changed the 1 of p-value to >0.99.

5. Please upload the tables as separate, individual files.
Answer: We upload the tables as individual files.

6. Please describe the role of the funding body in the design of the study and collection, analysis, and interpretation of data and in writing the manuscript should be declared.
Answer: We have described the role of the funding body for analysis and interpretation of data.

Thank you for your constructive review. We hope that the revised manuscript now meets the journal’s standards for publication.

Reviewer 2

We appreciate your review of our manuscript “Clinical characteristics and role of whole body bone scan in multifocal osteonecrosis”. In response to your comments, we have added the necessary clarifications, as summarized below. The changes are underlined in the revised manuscript.

1. Materials and Methods, first page, Lines 4-13. MRI or XRAY? So not all patients had both examinations of the lower limbs? Thus, I understand that you compared whole body bone scan with MRI and/or X-RAY of just the lower limbs, which necessarily leads to the missing of ON from the pelvis to the shoulders by the latter modalities. Isn't true? However, Figure 1 shows x-rays of the shoulders! Authors should better clarify which districts were investigated by X-RAYs and MRI. Why did you exclude 40 patients with positive WBBS and negative MRI?
We compared whole body bone scan with MRI and/or X-ray of the any sites, such as shoulders, hips, ankles, and knees. Therefore, we have changed “the MRI or x-rays of hips, knees, and ankles” to “the MRI or X-rays of the sites, such as hips, knees, ankles and shoulders” (Methods section, line 6-7, page 4). Also, 40 patients were excluded from patients who were initially evaluated with the ON code but did not have ON. Although there were some cases showing false positives in WBBS, it was confirmed not to have ON in MRI. In comparing data between multifocal ON and oligofocal ON, these patients were excluded, but when the concordance rates were evaluated between the WBBS and MRI or x-ray, all data of these patients were analyzed. We have changed to “40 patients were excluded because their diagnosis was not confirmed to ON and MRI findings were negative.” (Methods section, line 4, page 4).

Thank you for your constructive review. We hope that the revised manuscript now satisfies the journal’s standards for publication.