Reviewer’s report

Title: Oncological and functional results after surgical treatment of bone metastases at the proximal femur

Version: 1 Date: 31 Aug 2017

Reviewer: Shoufeng Wang

Reviewer's report:

Major revisions:

In this study, the author investigated different surgical procedures for the patients with proximal femoral metastasis from cancer and compared the different result before and after the surgery. There are some questions for the author to elaborate:

1. What are the inclusion criteria and exclusion criteria for the patients who were treated with modular endoprosthesis, standard hip endoprosthesis and intramedullary nail or titanium plate?

2. Among these patients enrolled in this study, How many metastatic lesions in the skeletal system in one patient? Are there some difference in the procedures selected for patients with solitary metastatic lesion and multiple metastatic lesions?

3. Before the treatment, does the author have some evaluation system for the expected life span of the patients? Does the evaluation of the expected life span influence the application of the different treatment procedure?

4. Line 160 to line 162, "In 94 cases 3-4 weeks after surgery patients undergo external beam radiotherapy (8Gy). We performed radiotherapy in 77 patients after modular endoprosthetic replacement, 4 patients after standard endoprosthetic replacement and 13 patients after bone fixation."

What are the indications for the treatment of radiotherapy after surgery? When the patients were treated with wide resection and modular endoprosthetic replacement or standard endoprosthetic replacement, do they need the radiotherapy in the surgical location? Or, the other locations with metastasis in the skeletal system need this treatment?

5. Line 169-170, "We noticed 9 cases of local recurrences, 6 in patients who had no radiotherapy. Three patients after modular endoprosthesis replacement and 6 after bone fixations."
What is the definition of recurrence? After wide resection of the metastasis and modular endoprosthesis replacement, the new appearance of metastasis in the surgical field can be called recurrence. However, for the intralesional curettage and fixation, is it called recurrence or progression?

**Are the methods appropriate and well described?**
If not, please specify what is required in your comments to the authors.

Yes

**Does the work include the necessary controls?**
If not, please specify which controls are required in your comments to the authors.

Yes

**Are the conclusions drawn adequately supported by the data shown?**
If not, please explain in your comments to the authors.

Yes

**Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?**
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

I am able to assess the statistics

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Please indicate the quality of language in the manuscript:

Not suitable for publication unless extensively edited

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