Reviewer’s report

Title: Ulcer Metastasis? Anatomical Locations of Recurrence for Patients in Diabetic Foot Remission

Version: 0 Date: 29 Nov 2019

Reviewer: Benedictine Khor

Reviewer's report:

I would like to commend the authors for this research which makes a very important contribution to the evidence base. By stratifying granularly all documented diabetic foot ulcer (DFU) sites in the participant's history, they provide readers with illuminating insights on - (1) how vastly distinct the majority of DFU recurrence sites are; (2) only in a minority of cases (17%) have a DFU recurred back to the same anatomical location. This is a glaringly under-reported aspect in the majority of publications tackling the topic of DFU recurrence.

Major

Background, line 119-121 and 123 - I question the presumption made in the statement: 'It is now commonplace to talk about a DFU as a "malignancy" of the foot, and sometimes "wound hospice" is a viable alternative to conventional treatment'. The reason being this may not be universally reflective of settings outwith the authors' institutions and/or the United States. This presumption and subjective view is also similarly made in line 123, 'The cancer analogy is apt'.

Results, Figure 1a - This information is excellent and highly valuable.

Results, Figure 1b - I am not sure if I am seeing the value of Figure 1b. Could the authors please explain their intention in presenting this graph?

Results, Table 1 and Figure 2 - Could the authors please explain the differences in percentage values for each anatomical locations as stated between Table 1 and Figure 2? The titles for both identified DFUs as stratified by anatomical locations occurring prior to and during the study. However, as an example, in relation to the percentage values for DFU occurring prior to, it is stated as 56% in Table 1 and 27.0% in Figure 2 for the hallux.

Minor

Abstract, line 43 - DFU is a widely utilised abbreviation, however authors still ought to make this clear after their first use of diabetic foot ulceration in the abstract. I appreciate this may be an oversight as the authors were mindful to do so in their introduction.

Abstract, line 43 - I wonder if there is a better way to paraphrase 'considering multiple wounds uncensored during follow up' as the intended meaning behind this phrase is ambiguous.

Background, line 116 - Please remove the number (1) after breast and prostate.

Background, line 123 - Please restart numbering at (1).
Background, line 133-135 - This sentence may benefit from being rephrased. Perhaps as 'In fact, … reported that 38% of plantar forefoot DFU (excluding minor digits) recurred to the contralateral limb in patients in diabetic foot remission.'

Background, line 146-147 - Rather than '… in order to better characterise the anatomical locations to which DFU are likely to recur', it would be more accurate to state that, '… the anatomical locations at which DFU have recurred in study participants.'

Methods, line 162 - It would be helpful to specify what types of 'lesions' warranted an alert.

Methods, line 175-176 - This would be better placed within the first paragraph of the results section.

Results, line 216-219 - The two percentages (52% and 49%) referred to in this statement are not vastly different. May I suggest for both to be conveyed similarly as 'nearly half', instead of one as a 'majority' and the other as 'nearly half'.

Discussion, line 246 - Is there a missing word? '…other pre-ulcerative (signs?) and findings.'

Discussion, line 248 - Could the authors please explain what they mean by 'sound foot'?

Discussion, line 248-252 - This very long sentence would benefit from truncation.

Discussion, line 267-269 - Rather than likelihood, this would be better conveyed as a limitation.

Overall - Please ensure consistency in the positioning of titles. I note that the title is positioned before Table 1, whereas the title is positioned after all three figures.

At author's discretion

May I suggest that the authors remove their widespread use of the oxford comma throughout their manuscript - e.g. 'resulting in reduced morbidity, mortality, and cost' - and/or truncate long sentences. I have been equally guilty of committing the same crime in my writing and have stood corrected on multiple occasions.

The title encapsulates the content of this paper concisely, however may I suggest that the authors consider remove the phrase 'Ulcer metastasis?' from their title for directness.

Discussion, line 243-244 - May I suggest that the authors substitute the word 'focus' in this statement. The word focus implies a narrowing or zeroing in, whereas the authors are rightfully advocating for a broadening or wider consideration of areas to encompass both of the patients' feet.

Discussion, line 253-257; Conclusion, line 281-284 - May I suggest that the authors remove the promotion for once-daily temperature monitoring due to their conflict of interest.

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An article of importance in its field

**Quality of written English**
Please indicate the quality of language in the manuscript:

Acceptable

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