OPEN PEER REVIEW

Open Peer Review (OPR)

As a new feature for progressing towards transparency, we decided to open a new window for all of our editors as well as authors titled "**Open Peer Review**". We hope by this new facility, our reviewers will be more motivated and authors will be more satisfied with the review process. We believe that publishing our peer review reports could make a transparent and clear environment for all our efforts within a journal, but not all reviewers tend to publish their comments.

What is "Open Peer Review" process?

An "Open Peer Review" process is making the details of all review process (including reviewers, associate editors, and EICs comments) as "Public" as it is agreed by EIC, Authors, and reviewers.

Advantages of "Open Peer Review" process

- More transparency, constructiveness and tactful comments of the peer review process: leads to an increase in the quality of reviews
- More motivations for all involved roles in the review process
- Authors' satisfactions from the review process: Increases honesty between authors and reviewers
- Education of both authors and new students
- Prevents reviewers from following their individual agendas and leading to the detection of reviewers' conflicts of interests

You can find out more at:
https://brieflands.com/briefland/knowledgebase/category/tree.html#opr.html

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Peer Review Report for "Non-Surgical Management and Post-Surgical Rehabilitation of Carpal Tunnel Syndrome: An Algorithmic Approach and Practical Guideline"

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Review Timeline:

Submit Date: 29 Mar 2020
Revised Date: 2 May 2020
Accepted Date: 13 May 2020

Revision (0)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (0) 5 Apr 2020

Dear AE,
Notable points in this article (Non-surgical Management and Post-surgical Rehabilitation of Carpal Tunnel Syndrome: An Algorithmic Approach and Practical Guideline) include the following:
- The volume of the article is very large and includes 37 pages.
- There are three sections in this article (Non-surgical management of CTS, Post-operative management of CTS and Practical open carpal tunnel release post-op protocol) Each section could be a separate systematic review article. The combination of these three issues in this article has led to the loss of the Regular structure.
there is no flowchart or Flow diagram for detailing the article search. (How many articles have been reviewed? How many articles have been removed?)
- The search method and search details are not mentioned. It should be a full electronic search strategy for at least one database, including any limits used, such that it could be

repeated.
- The number of articles on Google Scholar with the keyword "CTS treatments" is 247,000, While only 96 articles have been selected here. The method of deleting this number of articles is not explained in detail.
- The demographic details of the reviewed articles are not described.
- Not described methods used for assessing the risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.
- The number of references for some conclusions is low, such as the following sections: Extracorporeal Shock Wave Therapy (ESWT), magnet therapy, Oral steroids, Gabapentin, Low-level laser therapy, Elevation, Ice therapy, Electrical stimulation, Bath, Exercise
- There is no separate discussion section in this article.
- The conclusion can be written in more detail.
- No reference was found for hospital protocols included in the article.
sincerely

REFEREE: Reviewer | **Revision** (0) 7 Apr 2020

Dear AE,
Thanks a lot for this interesting narrative review article. CTS is a very common condition and an evidence-based practical approach is very helpful for all clinicians. Some revisions and modifications may make it more suitable to publish.
1- I think narrative review articles, in contrast to systematic ones, mainly rely on knowledge and experience of authors and regularly do not need a search strategy. This manuscript is a form between two types and as no systematic search has done, it is better to omit search strategy, both in the abstract and main text and this form may be confusing for readers. I suggest the context section should be changed to introduction and after omitting the section of literature search, continue with nonsurgical management of ....
2- In the schematic figure of the best options, the modalities should be separated, because there is no time priority and many of them may be applied simultaneously. Using directional arrows is not suitable, too.
3- Epidemiology of CTS in athletes of different sport disciplines may be added to the introduction section. As Asian Journal mainly deals with sports-related conditions or common problems of athletes, it will make the manuscript more attractive.
Yours

REFEREE: Reviewer | **Revision** (0) 11 Apr 2020

Dear AE,
Thanks for the privilege to do the reviews, it is an interesting paper which has aimed to review the treatments of CTS, but I have a major issue:
it is not either a narrative review or systematic review, I suggest that they rephrase the paper either in a systematic or narrative fashion. if the authors are going to change it to a narrative review, there is no point in declaring the search strategy and paper selection, and it usually involves the expert's opinion.
on the other hand, there has not been a new protocol, so I don't get the reason for reproducing the pictures.

Thanks

REFEREE: Associate Editor | **Revision** (0) 11 Apr 2020

Dear EIC,
This is a review of CTS treatments and rehabilitation. Three reviewers have reviewed the document. There are some concerns with the study, and the reviewers have provided detailed feedback. Authors have put in great effort; however, it needs ‘major revision’ before the acceptance.
Thanks

REFEREE: EIC | **Revision** (0) 11 Apr 2020

Dear Authors,
Your manuscript was reviewed by our reviewers. The reviewers have raised concerns regarding the manuscript, and therefore, your paper is not acceptable for publication in this format. However since the reviewers do find some merit in the paper, I would be willing to reconsider if you wish to undertake major revisions and re-submit, addressing the referees' concerns.
Please note that resubmitting your manuscript does not guarantee acceptance, and that your resubmission will be subject to a re-review before a decision is rendered.
Thanks

OPEN PEER REVIEW

Revision (1)

Reply to Reviewers

Ideally, the reviewing process can significantly improve the submitted manuscripts by allowing the authors to take into account the advice of reviewers. Author(s) must reply to all reviewers' comments in a separate Word file, point by point. A "**Reply to Reviewers**" document is submitted along with revised manuscript during submission of revised files, summarizing the changes that the authors made in response to the reviewers' comments. The responses to reviewers' comments specifies how the authors addressed each comment the reviewers made.

You can read the authors' responses to the reviewers' comments in the next page.

Thank you for your attention and your comments. We tried to revise the article again and all suggestions were carried out point-by-point. All the changes through the manuscript were highlighted in track change -Mode.

Reviewer 1:

Thanks a lot for this interesting narrative review article. CTS is a very common condition and an evidence- based practical approach is very helpful for all clinicians. Some revisions and modifications may make it more suitable to publish.

1- I think narrative review articles, in contrast to systematic ones, mainly rely on knowledge and experience of authors and regularly do not need a search strategy. This manuscript is a form between two types and as no systematic search has done, it is better to omit search strategy, both in the abstract and main text and this form may be confusing for readers. I suggest the context section should be changed to introduction and after omitting the section of literature search, continue with nonsurgical management of ….

- ✓ It was corrected and the search strategy was deleted.

2- In the schematic figure of the best options, the modalities should be separated, because there is no time priority and many of them may be applied simultaneously. Using directional arrows is not suitable, too.

- ✓ The priority of the options in the figure was deleted. The new figure was replaced.

3- Epidemiology of CTS in athletes of different sport disciplines may be added to the introduction section. As Asian Journal mainly deals with sports-related conditions or common problems of athletes, it will make the manuscript more attractive.

- ✓ The related reference in the field of epidemiology of CTS in athletes was added in the introduction.

Yours

Reviewer 2:

With respect

Notable points in this article (Non-surgical Management and Post-surgical Rehabilitation of Carpal Tunnel Syndrome: An Algorithmic Approach and Practical Guideline) include the following:

The volume of the article is very large and includes 37 pages.

✓ The main manuscript without references and tables contains 13 pages. However, we summarized the method section and deleted one page of the article.

There are three sections in this article (Non-surgical management of CTS, Post-operative management of CTS and Practical open carpal tunnel release post-op protocol) Each section could be a separate systematic review article. The combination of these three issues in this article has led to the loss of the Regular structure.

there is no flowchart or Flow diagram for detailing the article search. (How many articles have been reviewed? How many articles have been removed?)

The search method and search details are not mentioned. It should be a full electronic search strategy for at least one database, including any limits used, such that it could be repeated.

The number of articles on Google Scholar with the keyword "CTS treatments" is 247,000, While only 96 articles have been selected here. The method of deleting this number of articles is not explained in detail.

The demographic details of the reviewed articles are not described.

Not described methods used for assessing the risk of bias of individual studies (including specification of whether this was done at the study or outcome level), and how this information is to be used in any data synthesis.

✓ Thank you for your comments. All of the mentioned points such as flowchart or search method are related to systematic review and the present study was a narrative review. however, our inclusion criteria are mentioned in the following and if it is needed we can add it to the manuscript again:

“All key words (CTS and related keywords including ergonomic modifications, exercise therapy, physiotherapy, medications, immobilization, taping and bracing, injections and acupuncture in addition to post-operative treatments) were searched in PubMed, Cochrane, Scopus and some other databases such as google scholar. In addition, the experience and some hospitals protocols highlighted in table 1, were included. The time limitation was not applied. All articles were evaluated by four authors. The latest 96 references were evaluated.

Criteria for inclusion of papers were as follows:

(1) The study was done on patients with CTS.

(2) An acute trauma or any systemic disease such as osteoarthritis or connective tissue disease were not the cause of CTS.

(3) An intervention for treating the disorder such as splinting, injection, etc. were used employed.

(4) Outcomes on pain, function or recovery were reported post-treatment.”

The number of references for some conclusions is low, such as the following sections: Extracorporeal Shock Wave Therapy (ESWT), magnet therapy, Oral steroids, Gabapentin, Low-level laser therapy, Elevation, Ice therapy, Electrical stimulation, Bath, Exercise

- ✓ You are right. In these fields we did not find further acceptable articles. More research is needed in these fields.

There is no separate discussion section in this article. The conclusion can be written in more detail.

- ✓ As the manuscript is a narrative review, only a brief conclusion was added at the end of the article. However, we summarized each treatment in the related section.

No reference was found for hospital protocols included in the article.

- ✓ In the table 1, we included the hospital protocols in details.

sincerely

Reviewer 3:

Thanks for the privilege to do the reviews, it is an interesting paper which has aimed to review the treatments of CTS, but I have a major issue:

it is not either a narrative review or systematic review, I suggest that they rephrase the paper either in a systematic or narrative fashion. if the authors are going to change it to a narrative review, there is no point in declaring the search strategy and paper selection, and it usually involves the expert's opinion.

- ✓ The structure of the manuscript was corrected into a narrative review. All of the changes were highlighted in the text.

on the other hand, there has not been a new protocol, so I don't get the reason for reproducing the pictures.

- ✓ The authors preferred to use the original pictures in the manuscript. If it is not needed, the pictures could be replaced with images in the other references.

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Revision (1)

Here, you can see the **Reviewers**, **Associate Editors** and **EICs'** comments from the beginning to the end of the revision process.

REFEREE: Reviewer | **Revision** (1) — 4 May 2020

Dear AE,
The study is reviewed carefully. According to comments and revisions by the author, this manuscript is accepted.
Thanks

REFEREE: Reviewer | **Revision** (1) — 5 May 2020

Dear AE,
In relation to the search strategy, the author's comment was right.
The items raised in the article have been corrected.
sincerely

REFEREE: Reviewer | **Revision** (1) — 13 May 2020

Dear AE,
The revised manuscript was reviewed. Dear authors have applied due modifications according to the first review. Now, I think this is suitable to be published.
Thanks

REFEREE: Associate Editor | **Revision** (1) — 13 May 2020

Dear EIC,
All correction were included and they can be considered for publication.
Thanks

REFEREE: EIC | **Revision** (1) — 13 May 2020

Dear Authors,
The second round of peer review of your manuscript has been completed, and I am pleased to inform you that your manuscript has now been accepted for publication in our journal.
Thanks