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://sites.kowsarpub.com/kowsar/knowledgebase/category/tree.html#opr.html

Asian Journal of Sports Medicine
Article DOI: 10.5812/asjsm.85360
Published in: Asian Journal of Sports Medicine: 10(3); e85360

Peer Review Report for "Does Intra-Articular Platelet Rich Plasma Injection Improve Meniscal Repair Outcomes?"

Author(s): Rehab Abdelaal Elnemr, Hoda Mohamed Abdelnaby, Mohamed Mahmoud Elshafei

Review Timeline:

Submit Date:	14 Oct 2018
Revised Date:	4 Jan 2019
Accepted Date:	22 Jan 2019

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)

13 Dec 2018

Dear AE,

The manuscript focuses on important issue of biologic augmentation and treatment of osteochondral lesions. Authors aim to prove that PRP injection in painful patients 4 months after initial surgery is beneficial. Authors assesses PROM's and US of chondral condyles coverage. Provided data is interesting, but there is some missing points.

1. Exclusion and inclusion criteria should be provided.
2. MCID analysis should be performed. What type of patient did improve? Is there any correlation of pain relief in multi factor analysis? Did additional factors as BMI, leg alignment, type and size of initial chondral defects influence the outcome?
3. Observation period is short (6 mths), it would be interesting to obtain mid to long term data
4. Results section is divided into 1. Please provide subsections.
5. There is already MR data available on PRP effect on OA and chondral tissue (https://doi.org/10.1016/j.rbre.2015.07.002) . Please discuss
6. There is already 3 publication available for meniscal repair augmentation with PRP 1 prospective and 2 retrospective. Please discuss.
7. There are more limitations of the study. Please discuss

8. Strengths are not discussed.
9. Figure it not necessary, as it doubles the tables data.
Thanks.

REFEREE: Associate Editor | **Revision (0)** 15 Dec 2018

Dear EIC,
The comments for the authors:
The English is good.
1. The introduction should follow this pattern: a. What's known b. What's unknown (limitations and gaps in previous studies) c. Your burning question/hypothesis/aim d. Your experimental approach e. Why your experimental approach is new and different and important (fills in the gaps) in 3-4 paragraphs, please take the reader step by step from what is known to what is unknown. End with your specific question. please summarize at a high level! Leave detailed descriptions, speculations, and criticisms of particular studies for the discussion.
2. The Method: please consider the reviewer's comments.
3. The Result: A standard series for footnotes in tables is: *, †,‡,¶,#,**,††, etc. please see the reviewer's comments too and remove the grid lines.
Thanks.

REFEREE: EIC | **Revision (0)** 15 Dec 2018

Dear Author,
Thank you for submitting your manuscript to Asian J Sports Med. I now have the reports of the Referee(s), which suggest that your manuscript might be suitable for publication following a number of revisions. I attach some reviewer comments and invite you to submit a revised version of your manuscript addressing the points made.
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.

Reply to Reviewers

Thanks a lot my professor for your valuable comments.

Q1. *Exclusion and inclusion criteria should be provided.*

R1. Inclusion and exclusion criteria are already provided as

Exclusion criteria were some systemic disorders, such as diabetes, autoimmune diseases, hematological disorders, cardiovascular diseases, infections, local knee injuries other than meniscal injury as well as patients receiving treatment with anticoagulants–anti-aggregates or use of NSAIDs within 5 days before blood donation.

Inclusion criteria

(i) Patients aged 18–55 years
(ii) Complete meniscal tear in red-white zone repaired by single surgeon
(iii) Patients complaining of pain within 4 months after repair

Q2. *MCID analysis should be performed. What type of patient did improve? Is there any correlation of pain relief in multi factor analysis? Did additional factors as BMI, leg alignment, type and size of initial chondral defects influence the outcome?*
R2. We Hope to do MCID analysis and to study additional factors as BMI, leg alignment, type and size of initial chondral defects in the next following researches.

Q3. Observation period is short (6 mths), it would be interesting to obtain mid to long term data
R3. Thanks a lot for your observation. Yes, 6 months is a short term results but it appeared good-looking to both patients and orthopedic surgeon so the case not to be a failed repair case; that need a revision surgery. Long periods of follow up are indeed will be interesting but it may be subjected to a many bias as re-trauma or reinjure and any change in the patient BMI.but we hope in future researches to do longer follow up periods.

Q4. Results section is divided into 1. Please provide subsections.
R4. Thanks for your comment. We actually do it again after your comment and resend it.

Q5. There is already MR data available on PRP effect on OA and chondral tissue
R5. Thanks for your opinion but our main aim in this research was to study the efficacy of PRP for meniscal repair outcomes not OA and we used US because it's easier, less finance.

Q6. There is already 3 publication available for meniscal repair augmentation with PRP 1 prospective and 2 retrospective. Please discuss.
R6. Thanks, I agree with your opinion but the previous publications had some difference in the results as well as in their methods and conclusions, and we apply discussion about them.

Q7. *There are more limitations of the study. Please discuss*
R7. Yes our study limitations were the number of patients is low and short follow up periods.

Q8. Strengths are not discussed.

R8. The strengths of our research were its prospective, randomized, and blinded nature and the use of standard repair techniques by a single surgeon. In addition to, objective measuring assessment tool by a single radiologist using US.

Q9. Figure it not necessary, as it doubles the tables data

R9. We removed it, thanks a lot.

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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) — 20 Jan 2019

Dear AE,
The review is done perfectly. All the raised issues have been addressed. I recommend article to accept for publication in AJSM.
Thanks.

REFEREE: Associate Editor | **Revision** (1) — 21 Jan 2019

Dear EIC,
I am pleased that the authors have addressed the concerns of reviewers.
Regards.

REFEREE: EIC | **Revision** (1) — 22 Jan 2019

Dear Author,
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.