

## Peer Review File

Article information: <http://dx.doi.org/10.21037/atm-20-7180>

**Reviewer A:** Dear Editor/authors,

Thank you for the opportunity to review the manuscript “Narrative Review of the Objective analysis of long term outcome of Ponseti technique: experience from Dallas”. Despite the limitation of a narrative review, I do think this manuscript provides a relevant overview for the clubfoot-community and has the potential to be appropriate for a special issue. However I do have some suggestions, which I think could fairly easy be address by the author. My most important comment is to add a discussion-paragraph in which the included articles are, in a general matter, put into perspective of other available literature on the outcome of the Ponseti technique (item 6 and 7 of the Narrative Review Checklist).

**Reply:** Thank you very much. Below, I’ve addressed each of your comments that are listed. As this article is intended to present a summary of our institution’s experience, as others will do with their experiences, I have not added further discussion in this manuscript involving comparisons/perspectives of others’ literature on the outcomes of Ponseti’s technique.

Please find a detailed list with my comments below.

### **Abstract**

**Comment 1:** Objective: please make clear that this summary is based on previously published studies on the database.

**Reply 1:** this is now made clear on line 48 in the abstract:

“...technique, and is based on previously published studies utilizing information from the database.”

### **Background**

**Comment 2:** Title on page 6, lines 77-78 does not match the title on the title page.

**Reply 2:** this is now changed so the title is the same on all pages (pages 1,2, and 6).

**Comment 3:** Line 89-90, was inclusion only from the start of treatment or also as soon as the patient was presented at TSRH, e.g. in case of referrals?

**Reply 3:** All patients were referred in to TSRH, nearly all were newborns. Lines 89-90 now read: “..... included all of our new patient referrals with clubfeet who were willing to enroll.”

**Comment 4:** Line 93, double spacing between France. & Over?

**Reply 4:** corrected on line 94.

**Comment 5:** Line 95-96, add a short description on the –data in the– database. How many patients treated with Ponseti are currently in the database, what is the mean/median and range of follow up, which is data gathered and when/ at which instances of the treatment and clinical follow up?

**Reply 5:** This information is added. Lines 96-100 now read: “To the present time, there have been 1118 patients (1585 clubfeet) enrolled in the database that have been treated with the Ponseti method. Data that has been collected includes demographics, clinical history, clinical outcomes, brace wear compliance data from temperature sensors, surgery that is required, radiographs, and gait studies. The range of patient follow-up found in our publications range from 2 to 17.6 years.”

**Comment 6:** Line 102 change “(Karol)” into “by LA Karol” and possible co-authors.

**Reply 6:** Change made. Line 107 now reads: “.....analysis is presented in another article by LA Karol and KA Jeans in this special clubfoot.....”

### ***Methods***

**Comment 7:** Line 125-126, what was the aim of providing this contact information? I cannot imagine that providing the information would optimize brace compliance. Were parents stimulated to contact the nurse in case of difficulties/what was the role of the nurse etc.?

**Reply 7:** for clarity, lines 129-131 now read: “.....contact information was provided so that any brace wear questions or concerns could be addressed expeditiously, with the goal being to limit unintended time spent out of the brace.”

**Comment 8:** Line 126-127, in order to schedule a new appointment or as a digital medical consultation?

**Reply 8:** Lines 126-127 now read: “.....or certified mail in order to schedule a new appointment.”

**Comment 9:** Line 128-131, was this in the full-time and/or nighttime period?

**Reply 9:** for clarity, lines 136-137 now read: “This data logger was, and continues to be, used for both the full-time bracing period and nighttime-only bracing period.”

**Comment 10:** Line 132-134, Did parents and clinicians know that there was a sensor in place? If so, what reason for equipping the brace with the sensor was given to

parents and clinicians?

**Reply 10:** for clarity, line 139 now reads: “.....being monitored, rather only that temperature was being assessed in the brace.”

**Comment 11:** Line 134, double “.”

**Reply 11:** corrected.

**Comment 12:** Line 134-135, what was the definition of a relapse?

**Reply 12:** Definition added. Lines 142-144 now read: “Relapse was determined clinically by the provider, and defined as recurrent hindfoot varus or ankle equinus that did not allow dorsiflexion to neutral; or recurrence/persistence of forefoot adductus or cavus, or any combination thereof.”

**Comment 13:** Line 145-146, please add a few, representative, examples of other minor procedures

**Reply 13:** Examples added. Line 154-155 now read: “.....other minor procedures such as repeat isolated tendo-Achilles lengthening, plantar fascia release, or lateral column shortening.”

### ***Outcomes***

**Comment 14:** Line 155, are you based on your elaborate experience able to hint on what type of patients form these exceptions?

**Reply 14:** Lines 164-167 now read: “.....acknowledging that there will be some exceptions such as severe clubfeet treated by clinicians inexperienced with the Ponseti method, or in teratologic clubfeet in infants initially thought to be idiopathic, but later diagnosed with other conditions such as distal arthrogyrosis or neuromuscular abnormalities.”

**Comment 15:** Line 163-164, provide details on how many/ in how many cases limited and full procedures were performed

**Reply 15:** Lines 176-177 now read: “Thirty-two of these 61 feet had limited procedures and 29 feet had full posteromedial releases.”

**Comment 16:** Line 171-174, I am not sure which message the author would like to convey. Please rephrase.

**Reply 16:** The sentence was changed, and now reads on lines 186-188: “However, in those with successful nonoperative outcomes, we did find that they tended to use the nighttime braces fewer and fewer hours over the course of the first two

years.(11).”

**Comment 17:** Line 179-181, was this finding related to the occurrence of a relapse?

**Reply 17:** No

**Comment 18:** Line 190-192, specify the duration of the follow up.

**Reply 18:** Lines 203-204 now read: “.....over an extended period of time (average 8.8 years, range 5-17.6 years) to determine the rate of recurrence....”

**Comment 19:** Line 192, one hundred twenty-two -> 122

**Reply 19:** Changed on line 205.

**Comment 20:** Line 193-195, provide details on how many/ in how many cases limited and full procedures were performed

**Reply 20:** Lines 208-212 now read: “Between ages 2-5 years, 79 of these 122 patients had surgery on 104 feet. 90 of these feet had limited procedures and 14 feet had complete posteromedial releases. After the age of 5 years, an additional 43 patients had surgery, all of which consisted of limited procedures performed in isolation or in combination, except for 2 feet which needed complete posteromedial releases.”

**Comment 21:** Line 214, double spacing between to & be?

**Reply 21:** corrected.

**Comment 22:** Line 218-220, specify timespan of follow up

**Reply 22:** Line 232 now reads: “.....occurrence, we studied 789 patients with 1174 clubfeet, with followup  $\geq 2$  years, who were....”

**Comment 23:** Line 222, specify if the nonoperative treatment was Ponseti method and/or French physiotherapy

**Reply 23:** Lines 237-238 now read: “.....nonoperative treatment which, in this study, consisted of either the Ponseti method or the French physiotherapy method.”

### ***Conclusion***

**Comment 24:** Line 229, we’ ve -> we have

**Reply 24:** corrected, now on line 244.

### ***References***

**Comment 25:** 15-28 not relevant for this manuscript and most likely part of other

article in the same special issue.

**Reply 25:** References 15-28 are now deleted.

***Checklist***

**Comment 26:** Item 5, Considering the taken approach for writing up this narrative review, I understand that the author listed NA for the research selection. But I would urge the author to briefly be described study selection at the end of the introduction.

**Reply 26:** Not intended for this article of our institution's experience.

**Comment 27:** Item 6 2) limitations and/or quality of research reviewed, and 3) need for future research & Item 7, are not part of the manuscript. Please address these points in a discussion-paragraph.

**Reply 27:** Not intended for this article of our institution's experience.

**Reviewer B:** Dear Mr. Richards,

thank you for this very interesting and reading-worth paper! Those are the Dallas-clubfoot-essentials, so to say :)

Apart from a few typing errors I just came across two or three minor details, though I fully accept that I am really not the person to tell you how to write papers...

Thank you again for this enlightening work.

**Reply:** Thank you for your comments.