

## Peer Review File

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### **Reviewer A**

*First of all, I don't think the authors need to emphasize the literature review in the title because in the main text the authors did not use a separate part to describe the need for the review, methods for the retrieval of literature, and review the retrieved studies in detail. Original studies also need a brief literature review, which can be placed in the introduction and discussion of the text, but it is not necessary to describe this work as a literature review. The current title is also unclear. Please clarify the subjects, interventions, outcomes of interest of this study, and the clinical research design of this study, i.e., a retrospective cohort study.*

Reply: Thanks for your comment. We changed the title and reviewed the discussion according to your suggestion.

Changes in the text page 1, lines 1-4.

*Second, the abstract needs further revisions. The background did not explain the clinical needs of the focus on the efficacy and outcomes of conservative treatment for spinal TB and what the clinical questions to be answered by this study are. The methods need to describe the inclusion of subjects, the assessment of baseline clinical factors, follow up procedures, and measurements of efficacy and long-term prognosis outcomes. The current conclusion is not supported by the above findings in the results, for example, the authors did not compare the outcomes of patients who were early diagnosed and delayed diagnosed. The conclusion needs to be made based on the findings strictly.*

Reply: Thanks for your comment. We revised the abstract accordingly.

Changes in the text: page 1-2, lines 6-40

*Third, the introduction of the main text is poor and not informative. The authors did not review what has been known on the efficacy and long-term outcomes of conservative treatment of spinal tuberculosis, did not have comments on the limitations and knowledge gaps of prior studies, and did not analyze why there were controversies regarding conservative vs. surgical management of spinal TB in the absence of neurologic deficits. In particular, why the current data can help address this controversy and what the clinical questions to be answered by this study are.*

Reply: Thanks for your comment. We revised the introduction section according to your suggestion. We also analyzed the controversies regarding conservative vs surgical management and updated the aim of the study.

Changes in the text: page 4, lines 80-97

*Fourth, the methodology of the main text is not adequate. The authors need to strictly write this part according to the STROBE statement. Please accurately describe the clinical research design, sample size estimation, follow up procedures, and measurements of efficacy, safety, and long-term prognosis outcomes. The statistics part needs to be more detailed, including the statistical software, P value for statistical significance, and analysis on factors associated with outcomes.*

Reply: Thanks for your comment. We revised the methodology section according to your suggestion. We clarified the design and procedures used and defined measurements of efficacy and safety. We investigated and reported data on the SF-36 questionnaire to add clinical experimental research as suggested.

Changes in the text: pages 5-6, lines 108-154

### **Reviewer B**

*1) It is recommended to increase the clinical characteristics of patients with spinal tuberculosis of different ages and analyze the clinical efficacy of conservative treatment.*

Reply: Thanks for your comment. We revised the manuscript according to your suggestion.

Changes in the text: page 4, lines 76-79 and 87-92

*2) In the introduction of the manuscript, it is necessary to clearly indicate the knowledge gaps and limitations of prior study and the clinical significance of this study.*

Reply: Thanks for your comment. We indicated in the revised text the limitations of prior studies and the clinical significance of the current study.

Changes in the text: page 4, lines 81-82 and 93-95

*3) This study is based on the analysis and summary of the literatures. It is suggested to add clinical experimental research, which may be more meaningful.*

Reply: Thanks for your comment. We investigated and reported data on the SF-36 questionnaire to add clinical experimental research as suggested. We believe that the effort put into reviewing this data and improving the manuscript makes it even more interesting to readers. We thank you for this suggestion.

Changes in the text: page 6, lines 134-140.

*4) What new basis can the results of this study provide for the early diagnosis, disease evaluation and prognosis judgment of spinal tuberculosis? It is recommended to add relevant content to the discussion.*

Reply: Thanks for your comment. We added and discussed in the revised text relevant content on global mental and physical wellbeing according to your suggestion. We also revised the conclusions section providing new data on prognosis.

Changes in the text: page 10, lines 231-233, lines 251-255, and 307-309.

*5) The introduction part of this paper is not comprehensive enough, and the similar papers have not been cited, such as “Rare huge cold abscess and paraplegia in a young man with multidrug-resistant spinal tuberculosis, Quant Imaging Med Surg, PMID: 33014735”. It is recommended to quote the article.*

Reply: Thanks for your comment. We revised the introduction section and quoted the recommended article in the manuscript.

Changes in the text: page 4, lines 76-92.

*6) It is recommended to increase the assessment tools for functional recovery and associative factors for functional recovery in spinal tuberculosis.*

Reply: Thanks for your comment. We reported functional recovery and data on SF-36 in the revised text according to your suggestion.

Changes in the text: page 9, lines 201-202 and page 11, lines 251-255.