

Peer Review File

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Reviewer A

This is important study the shows that interspinal fixation is as good as laminectomy. This is very important study, that is well written.

Reply: We thank you for taking the time to review our paper and your kind words.

Reviewer B

Recommend discussion of other ISP designs and if they may make a difference. Also, would think that a discussion of what revision surgeries performed in either arm would be insightful.

Reply: We updated the study and included an additional figure based on your recommendations.

Changes in the text: see Page 14, Line 7-20, and Figure 7.

Reviewer C

This is an interesting study on an argument which is rarely considered in the spine surgery literature, the use of inter-spinous devices for lumbar spine stabilisation. The study is well planned, well performed and well presented. The conclusions are sound and well based: using Interspinous devices in well selected patients harbouring moderate spinal instability brings excellent clinical results with minimal invasivity. Moreover

results are better if the operated spaces are located above the L5 S1 interspace.

These conclusions match well with the ones of a study (1) I performed using another device, Bacfuse (which to my information is not longer in production now) however the authors convincingly demonstrate that the device they use, InSpan, would produce similarly good results.

1 – Spallone A, Lavorato L, Belvisi D. Long-term Results for the BacJac Interspinous Device in Lumbar Spine

Degenerative Disease. J Neurol Surg A Cent Eur Neurosurg.2018 May 14. doi: 10.1055/s-0038-1641180.

Reply: Thank you, we included the reference to BacJac. We believe your review helps make the paper stronger.

Changes in the text: see Page 13, Line 1-3.

Reviewer D

Congratulations to authors in a very nice results of interspinous spacer (stand-alone) result in treating spinal stenosis. I have no further comment on the manuscript. I hope

this manuscript will enhance the knowledge of interspinous spacer in treating spinal stenosis.

Reply: We thank you for taking the time to review our paper and your kind words

Reviewer E

This study by a single surgeon does not add much to the existing extensive ISP literature. The advantage of the fixation are not clearly demonstrated. The paper appears to promote the device. This reviewer wonders whether the patients did that well because of minimal stenosis - listed as one of the limitations by the author.

Reply: We thank the review for their feedback. The product used in the study is only one of many being used in the market and previous studies have shown good results. We hope that this study stimulates further clinical research.