OPEN PEER REVIEW

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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.

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- Education of both authors and new students.
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You can find out more at:

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Peer Review Report for "Responsiveness and the Minimal Important Change of Knee Injury and Osteoarthritis Outcome Score Following Physiotherapy Intervention in Iraqi People with Knee Osteoarthritis"

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Review Timeline:

▶ Submit Date: 5 Apr 2023

▶ Revised Date: 7 Jun 2023

▶ Accepted Date: 13 Jun 2023

Revision (0)

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

Salar Hariri: Reviewer | Revision (0)

29 Apr 2023

Dear AE,

The study is reviewed carefully. According to the comments, this manuscript needs minor revision.

There are some comments which should be addressed by the author:

Background:

The article's introduction contains unnecessary sentences that are not related to the article's title and should be removed. The introduction should be brief and directly related to the article's topic.

For example, sentences related to the Knee injury and Osteoarthritis Outcome Score (KOOS) questionnaire's secondary complications and translated versions should be removed unless directly relevant to the article's topic.

Suggestion: Consider rephrasing the last sentence of this point to improve clarity: "For example, unless directly relevant to the article's topic, sentences related to the Knee injury and Osteoarthritis Outcome Score (KOOS) questionnaire's secondary complications and translated versions should be removed from the introduction."

The last paragraph of the research summary should be more detailed and provide additional information.

Suggestion: To provide more clarity, specify what additional information should be included in the last paragraph of the research summary. For example, you could add, "The last paragraph of the research summary should include detailed findings from the study, highlighting significant outcomes and key results."

Methods:

The last two paragraphs of the introduction should be moved to the Outcome measure section in the article's text, specifically the changes in the KOOS subscales and the ROC curve analysis. The statistics should be in the last paragraph of the methodology section. Suggestion: Consider rephrasing this point to improve readability and clarity. For example, "In the article's text, the last two paragraphs of the introduction should be relocated to the Outcome measure section, focusing on presenting changes in the KOOS subscales and the ROC curve analysis. Additionally, the statistics should be moved to the last paragraph of the methodology section for better organization."

Results:

The following sentence should be moved to the methodology section: "Of these, 2 people did not want to participate in the study, 3 had a history of intra-articular injection, and 2 reported low back pain. Therefore, this study was conducted on 50 volunteers who met the inclusion and exclusion criteria."

Suggestion: To clarify the suggestion, specify which sentence should be moved to the methodology section. For example, "The sentence mentioning the reasons for exclusion and the final sample size (e.g., 'Of these, 2 people did not want to participate in the study, 3 had a history of intra-articular injection, and 2 reported low back pain. Therefore, this study was conducted on 50 volunteers who met the inclusion and exclusion criteria.') should be moved to the methodology section for better alignment with the study design and data collection process."

In Table 2, the value of the paired t-test should be included.

Suggestion: To enhance clarity, consider rephrasing this point to specify where exactly in Table 2 the value of the paired t-test should be included. For example, "The value of the paired t-test should be included in Table 2, specifically in the column or row that pertains to the relevant comparison.

Overall, the article is useful, but some extra sentences should be removed, and the entire article should be edited for clarity.

Leila Youzbashi: Reviewer | Revision (0)

22 May 2023

Dear AE,

Firstly, the reviewers thank the authors for their efforts in preparing the manuscript. However, some corrections and modifications need to be made to improve its quality.

Title:

The title appropriately reflects the content of the manuscript.

Abstract:

The abstract could be more specific and detailed. Important characteristics of the subjects, such as gender, age range, weight, and physical activity level, should be mentioned.

Methods:

Important characteristics of the subjects, such as gender, age range (age over 50 years may not be appropriate), weight, and physical activity level, should be specified.

The study should also consider the participants' exercise history and athletic background.

Was the physiotherapist consistent for all participants?

Was the physical and occupational activity of participants considered during the study implementation?

Results:

We believe presenting the results in a graph format would be more effective than using tables (tables 2 and 3).

Discussion:

Some sentences are too long and difficult to follow.

Only one article (Mostafaee et al.) is used to discuss and compare the results, and the discussion section is too brief and lacks substantial evidence.

References:

The referencing should be reviewed, and more recent studies should be included. Many references are over five years old and may not reflect current research.

Thanks

Maghsoud Nabilpour: Associate Editor | Revision (0)

23 May 2023

Dear EIC,

We have completed the review process, and based on the reviewers' decision, we request a "Minor Revision" for this manuscript. While we believe that it has sufficient quality to proceed to the next phase of the review process, some significant (but minor) revisions are needed in certain areas.

Thanks

Morteza Taheri: EIC | Revision (0)

25 May 2023

Dear Author,

I am writing to inform you that your manuscript has been reviewed, and based on our editorial decision, we are requesting minor revisions to improve the quality of your paper. Please carefully review the reviewers' comments and suggestions and make the necessary minor revisions to your manuscript. Once you have made the revisions, please resubmit the revised manuscript as soon as possible. We appreciate your hard work and dedication to this research and look forward to receiving your revised manuscript.

Best Regards

EIC

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.

Dear editor,

Thank you for sending us the constructive comments of the reviewers on our manuscript. The criticisms were most helpful in revising the manuscript, which we believe has been much improved as a result. The changes that we made are highlighted in the text and our detailed responses are described on a point-by-point basis in the enclosed "response". All authors have contributed to the revised manuscript and are in agreement with all responses.

We are looking forward to hearing from you in due course.

Sincerely yours, on behalf of all co-authors,

Reviewer 1:

Background:

1. The article's introduction contains unnecessary sentences that are not related to the article's title and should be removed. The introduction should be brief and directly related to the article's topic.

For example, sentences related to the Knee injury and Osteoarthritis Outcome Score (KOOS) questionnaire's secondary complications and translated versions should be removed unless directly relevant to the article's topic.

Response: The authors greatly appreciate this observation. To address this concern, we have made significant modifications in manuscript introduction.

With respect to the second observation, the authors have removed un-necessary sentences as follows:

The original version of this questionnaire has acceptable validity, reliability, and responsiveness (14) and has been translated into different languages (15-22).

2. The last paragraph of the research summary should be more detailed and provide additional information.

Response: The authors carefully consider your comments and have made the necessary revisions in last paragraph of summary as follows:

Conclusions: All the subscales of the Arabic KOOS are responsive to physiotherapy treatment. Also, therapists and researchers can use the minimal important change values to evaluate whether their prescribed treatment was satisfactory and effective from their patients' point of view.

Methods:

The last two paragraphs of the introduction should be moved to the Outcome measure section in the article's text, specifically the changes in the KOOS subscales and the ROC curve analysis. The statistics should be in the last paragraph of the methodology section.

Response: Following your recommendation, the authors decided to remove the last two paragraphs of the introduction.

Results:

The following sentence should be moved to the methodology section: "Of these, 2 people did not want to participate in the study, 3 had a history of intra-articular injection, and 2 reported low back pain. Therefore, this study was conducted on 50 volunteers who met the inclusion and exclusion criteria."

Response: Following your recommendation, the authors moved the sentences to method section.

In Table 2, the value of the paired t-test should be included.

Response: Following your recommendation, the authors added F values for paired t-test to Table 2.

Overall, the article is useful, but some extra sentences should be removed, and the entire article should be edited for clarity.

Reviewer 2:

Firstly, the reviewers would like to thank the authors for their efforts in preparing the manuscript. However, in order to improve its quality, some corrections and modifications need to be made.

Title:

The title appropriately reflects the content of the manuscript.

Abstract:

The abstract could be more specific and detailed. Important characteristics of the subjects, such as gender, age range, weight, and physical activity level, should be mentioned.

Response: The authors greatly appreciate this observation. To address this concern, we added some details as follows:

Fifty volunteers (13 male and 37 female, mean age: 59.3±9.6 years old) with an orthopedic diagnosis of knee osteoarthritis participated in this study.

Methods:

Important characteristics of the subjects, such as gender, age range (age over 50 years may not be appropriate), weight, and physical activity level, should be specified.

The study should also consider the participants' exercise history and athletic background.

Response: The authors greatly appreciate this observation. As mentioned in manuscript, the aim of study was to assess the ability of KOOS to detect change. A reliable measure is one that tends to produce the same results when administered on two or more occasions under identical conditions. Any observed change in the measure is typically attributed to clinically relevant changes in health. Alternatively, change in a measure has been assessed using a single group repeated measures design, where patients with knee OA are assessed before and after physiotherapy treatment. This strategy has frequently been employed to compare change in

various health status measures. Hence, different characteristics of participants were not considered because these characteristics had no impact on main variable of study that was the "change" in subscales of KOOS.

Was the physiotherapist consistent for all participants?

Response: The authors agree with the reviewer's comment and have added details to the method as follows:

Demographic and baseline clinical characteristics of the participants, including gender, age, height, weight, body mass index, cognitive status, years of education, and the affected knee were recorded in the first session by a physical therapist (MA). The Arabic KOOS questionnaire was completed by the participants before and after the physiotherapy program. The physiotherapy program was 4 weeks (3 sessions per week; each session 45 minutes) and contained routine physical interventions for people with OA including electrotherapy (28), thermal modalities (29), and strengthening and stretching exercises (30). The interventions were done by a physical therapist (MA).

Was the physical and occupational activity of participants considered during the study implementation?

Response: The authors greatly appreciate this observation. As mentioned before, different characteristics of participants were not considered because these characteristics had no impact on main variable of study that was the "change" in subscales of KOOS.

Results:

In our opinion, presenting the results in a graph format would be more effective than using tables (tables 2 and 3).

Response: The authors appreciate the reviewer's comment. Because of the number of variables and parameters in tables it is not common to use graphs for presenting results in all studies about responsiveness. Therefore, we have no graph in present study. Table3 was revised and modified.

Discussion:

Some sentences are too long and difficult to follow.

Response: Thanks for your constructive comment. The discussion was revised and some sentences were removed. Also, lengthy sentences were revised. The revised sentences are highlighted in discussion.

Only one article (Mostafaee et al) is used to discuss and compare the results, and the discussion section is too brief and lacks substantial evidence.

Response: The authors appreciate the reviewer's comment. By reviewing the previous studies, the only study had reported MIC values for KOOS (Persian version) for people with knee OA was the study of Mostafaee et al. therefore this study used for comparisons of the results of present study.

References:

The referencing should be reviewed, and more recent studies should be included. Many of the references are over five years old and may not reflect current research.

Response: The authors greatly appreciate this observation. The references were revised and 4 new references (rfs: 5, 20, 27, 31) were added.

OPEN PEER REVIEW

Revision (1)

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

Salar Hariri: Reviewer | Revision (1)

13 Jun 2023

Dear AE,

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

Thanks

Maghsoud Nabilpour: Associate Editor | Revision (1)

13 Jun 2023

Dear EIC,

The reviewers have endorsed publication based on the authors' answers to the reviewers' comments.

Kind Regards

Morteza Taheri: EIC | Revision (1)

13 Jun 2023

Dear Authors,

The study is reviewed carefully. According to comments and revisions, this manuscript is accepted.

Thanks