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REVIEWER'S REPORT

Manuscript No.: IJAR-50844 Date: 31-3-25

Title: SURGICAL MANAGEMENT OF MALLEOLAR FRACTURES IN ADULTS

Recommendation:

Accept after minor r	evision:			
Prevalence and Imp				
Among Dental Pract				
	Excel.	Good	Fair	Poor
Rating _				
Originality		V		
Techn. Quality			/	
Clarity				
Significance		V		

Reviewer Name: Dr. Payal Adwani(PT)

Date: 31-3-25

Reviewer's Comment for Publication.

- This manuscript has potential but currently falls short of publication standards.
- Prioritize ethical documentation, resolve inconsistencies, and strengthen the discussion with contemporary context.
- A revised submission would be valuable for clinicians managing malleolar fractures.

Detailed Reviewer's Report

General Assessment

• This prospective study evaluates the efficacy of surgical management in 30 patients with malleolar fractures, utilizing the Lauge-Hansen classification and Olerud-Molander ankle score. While the study provides valuable insights into functional outcomes and complications, several revisions are necessary to enhance clarity, methodological rigor, and statistical accuracy.

Strengths

- Clinical Relevance: Addresses a common orthopedic issue with practical implications for surgical decision-making.
- Outcome Measures: Use of the validated Olerud-Molander score strengthens result interpretation.
- Complication Reporting: Transparent documentation of postoperative issues (e.g., superficial infections).

Major Concerns

- 1. Methodological Inconsistencies
- Follow-Up Duration: Discrepancy between the abstract (6 months) and methodology (4 months). Clarify and standardize.
- Sample Size Justification: No power calculation provided. A small sample (n=30) limits generalizability.
- Ethical Oversight: Missing Institutional Review Board (IRB) approval and patient consent statements.

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- 2. Statistical and Data Presentation Issues
- Table Formatting:

Table 1 ("Mode of Injury") lacks headers and proper alignment.

- Table 3: Ensure percentages align with case numbers (e.g., pronation-external rotation: 7/30=23.33%, not "minimal complications").
- Outcome Reporting: Percentages in Table 5 are correct but could benefit from confidence intervals to indicate precision.
 - 3. Referencing and Literature Context
- Outdated References: Key citations (e.g., Lauge-Hansen, 1950; Court-Brown, 1995) should be supplemented with recent studies (e.g., post-2015).
- Discussion Gaps: Limited comparison to contemporary surgical techniques (e.g., minimally invasive approaches).
 - 4. Clarity and Grammar
- Syntax Errors:

Page 2, Line 49: "Complications from surgery include wound infection, pulmonary embolism..." → "Complications of surgery..." Page 5, Table 4: "Taping, wrapping 4 05" → Unclear phrasing. Hyphenation: Inconsistent use (e.g., "postoperative" vs. "post-operative").

Minor Revisions

Introduction:

- Update epidemiology data (e.g., cite Meena et al., 2015 instead of Court-Brown, 1995). Results
- Clarify injury mechanism percentages in-text (e.g., pronation-external rotation: 23.33%). Discussion:
- Expand on complication management (e.g., antibiotic protocols for infections).
- Address study limitations (small sample, single-center design).
 Figures:
- Include figures referenced in the text (e.g., Fig1, Fig6-8). Statistical Corrections
- Table 5: Add a footnote explaining the Olerud-Molander scoring ranges (e.g., "Excellent: 91–100%").
- Injury Pattern Analysis: Consider chi-square tests to compare distribution differences with prior studies (if feasible).

Recommendation

• Revise and resubmit after addressing major concerns. The study contributes to the literature but requires enhanced methodological transparency, updated references, and improved data presentation.