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REVIEWER'S REPORT

Manuscript No.: IJAR-53497 Date: 22-08-2025

Title: PRE Â- OPERATIVE DETERMINATION OF INTRAMEDULLARY NAIL LENGTH IN TIBIA BY ANTHROPOMETRIC MEASUREMENT Â- A PROSPECTIVE STUDY,

Recommendation:	Rating	Excel.	Good	Fair	Poor
Accept as it is	Originality		✓		
Accept after minor revision✓ Accept after major revision	Techn. Quality		√		
Do not accept (Reasons below)	Clarity		✓		
Do not accept (Neusons below)	Significance		✓		

Reviewer Name: Shashi Prakash Date: 22-08-2025

Reviewer's Comment for Publication.

(To be published with the manuscript in the journal)

The reviewer is requested to provide a brief comment (3-4 lines) highlighting the significance, strengths, or key insights of the manuscript. This comment will be Displayed in the journal publication alongside with the reviewers name.

This prospective study is useful evidence in favor of anthropometric techniques in preoperative tibial nail length measurement. In as much as it confirms TT-MM and TT-A distances as accurate predictors, it presents a practical solution that saves time during surgery and averts unnecessary radiation, particularly useful in the resource-poor environment. Some minor reordering for clarity, data layout, and format would make it more impactful.

Detailed Reviewer's Report

The abstract is fairly well-written and concise, with clear summary of objectives, methods, results, and conclusions. There is repetition of ideas (e.g., decrease of radiation exposure noted several times) and flow can be enhanced by including key statistics within the conclusion for improved emphasis. Condense sentences to eliminate redundancy, incorporate sample size clearly within the results section, and conclude with a clear determination of clinical applicability.

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The introduction strongly supports the study, highlighting the drawbacks of intraoperative determination of nail length and advantages of anthropometric measurements. Make the research gap clearer (why previous studies were inadequate or contradictory), and explicitly indicate how this study is distinct from earlier studies (e.g., prospective approach, comparison of six parameters).

Aims and Objectives are clearly expressed, though with a bit of clumsy wording that can be made more readable. Rephrase briefly as: "To compare six anthropometric measurements to predict tibial nail size and identify which parameter has the best correlation with the reference TT-MM distance." Refrain from splitting aims and objectives into two distinct repetitive sentences.

The methodology is well outlined, with good inclusion of measurement parameters and statistical method. But patient demographics (age distribution, sex ratio) and ethical clearance details may be briefly included for the sake of completeness. The explanation of constants and regression equations is wordy and may be simplified. Include a brief sentence to affirm institutional ethics approval. Make technical explanation of "constants" and "regression equation" simpler for easier readability. Include a flowchart of patient enrollment and analysis steps in the final manuscript.

The findings section clearly states main findings using proper use of correlation coefficients.

The discussion does an excellent job of comparing findings with previous literature and emphasizing clinical usefulness. At times, though, it reads more like a narrative recitation of findings without critical analysis (e.g., why TT-MM should be better than others, why perhaps anatomically). Include a short mechanistic explanation of why TT-MM and TT-A are better. Mention limitations (single-center study, small sample size, possible measurement error). Suggest future research directions (validation in larger multi-center cohorts). Eliminate statistical value repetition already presented in the results.

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The conclusion is solid and is results-oriented, focusing on clinical utility. It is a bit wordy, though. Eliminate duplicated point of discussion and succinctly say one or two take-home points: "TT-MM is the best predictor of tibial nail length; TT-A and BHR yield good alternatives when lower limb measurement is not possible."