

Review Form 1.7

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| Journal Name: | Journal of Advances in Medicine and Medical Research |
| Manuscript Number: | Ms_JAMMR_107657 |
| Title of the Manuscript: | A short overview of Cervical spondylosis, including its diagnosis and current treatment strategies |
| Type of the Article | |

Review Form 1.7

PART 1: Review Comments

| | Reviewer's comment Major revision required! | Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here) |
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| <p>Compulsory REVISION comments</p> <p>1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript)</p> <p>2. Is the title of the article suitable? (If not please suggest an alternative title)</p> <p>3. Is the abstract of the article comprehensive?</p> <p>4. Are subsections and structure of the manuscript appropriate?</p> <p>5. Do you think the manuscript is scientifically correct?</p> <p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p><u>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</u></p> | <p>1. The topic is important.</p> <p>2. Yes</p> <p>3. Yes, but gaps</p> <p>4. To an extent</p> <p>5. No.</p> <p>6. Not the problem</p> <p>The table provides the most pertinent framework and the entire article should be rewritten, critique in detail the interventions delineated in each article. Organization would be helped by authors outline each paragraph and rewriting once they appropriately reorganize the outline – repetitiveness, order (non-sequetors), etc. Gramer is problematic. There are many unrefernces assumptions and incomplete claims (e.g., what is the sample that is being described as 1820 men and typical age 45,85,16,19?) Cervical spondylosis does NOT refer to narrowing of neuroforamen, etc. Cervical spondylosis brought on by congenital bone anomalies-blocked vertebrae? Ventral spondylotic bars are frequently the cause of degenerative stenosis? MRI does not have the claimed sensitivity Provocative discography is not required Opioid discussion is problematic! Myofascial trigger points are differential diagnosis, not related.</p> | |
| <p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p> | | |
| <p>Optional/General comments</p> | | |

PART 2:

| | Reviewer's comment | Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here) |
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| <p>Are there ethical issues in this manuscript?</p> | <p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p> | |

Reviewer Details:

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