



SDI Review Form 1.6

Journal Name:	International Journal of Medical and Pharmaceutical Case Reports
Manuscript Number:	Ms_IJMPCR_31352
Title of the Manuscript:	One Antiresorptive Too Many A case report and clinical opinion
Type of the Article	Case study

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)



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PART 1: Review Comments

	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)
<u>Compulsory</u> REVISION comments		
<u>Minor</u> REVISION comments	We want to watch the images of CT and MRI. And we want to check the exact data of DEXA.	I have attached to this email reply the pertinent image from the MRI done 3 months before surgery to this email. In my text, I disagree with the radiologist who originally read the second radiograph with the proviso that recognition of the lateral cortical commencement of the fracture was possible in the radiograph dated three months before surgery, but <i>only in retrospect</i> (as I said) when the exact location of the very early lesion is compared to the radiograph the day prior to surgery after the fracture had progressed. Perhaps it will be satisfactory to the reviewer that I have quoted the exact interpretations in the modified text. The marrow edema mentioned can be clearly seen on the subsequent MRI image I have attached. I have also added the DXA comparison obtained on (and somehow justifying) the day of the fifth denosumab injection as well as a year earlier as the reviewer requested. These changes are highlighted in the revised text.
<u>Optional/General</u> comments	It is very interesting and edifying case.	I thank the reviewer for the generous comments.