



SDI Review Form 1.6

Journal Name:	British Journal of Applied Science & Technology
Manuscript Number:	2015_BJAST_17447
Title of the Manuscript:	The effects of active myofascial trigger point on anticipatory postural control
Type of the Article	

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:

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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	Language: There are too many English grammar-related issues in the manuscript. Also, the writing is quite loose. The authors need to seek English writing/editing professionals to improve the writing substantially. The remaining comments focus on scientific merit-related issues according to the structure of the manuscript. Title: The title should be pertinent to the study findings presented in the manuscript. There is no postural control findings, but only anticipatory response of arm movement. Please revise the title. Abstract: The results should be specific and informative and cover all major study outcomes, such as: 1) There was no significant difference in pre-motor time between the two groups. 2) The motor time and the reaction time in the MTP groups were significantly longer when compared to those in the control group. Barely stating "there were differences between groups" prevents readers from getting the most critical information - "delayed anticipatory response in MTP patients". The Conclusions section is quite loose. For example, for the first sentence, a better wording would be "Patients with MTP demonstrated a delayed anticipatory response in initiating arm movement than healthy individuals".	we tried to modify the manuscript language. So we have used the presence of a native of England for editing text. - I modified it. 1. I tried to correct them as much as possible - . - Ok, I modified it.



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	The second sentence would be “Such delayed response may cause ...” Introduction: The organization of the first paragraph is poorly done. Please follow a reasonable and easy to follow logic flow plot. For example, when you talk about pain, focus on pain. When you talk about MTP, focus on MTP. Don’t jump back and forth. There are too many pain-related terms such as “mechanical pain”, “regional pain”, and “musculoskeletal pain” in the first paragraph. Please reduce the number of terms if not critical to your current work. Since MTP is your main topic, many irrelevant materials can be removed. Line 26-27: The sentence is hard to understand. What is “hypothesis of accordance”? Please provide reference. Overall, the Introduction section does not provide sufficient details in terms of how MTP affects anticipatory response in postural control (but you only presented EMG data. where is postural control part?) Methods: The description of enrollment process is somewhat counterintuitive. Normally, participants are screened with the inclusion/exclusion criteria first and then sign consent document. Could you explain why signing consent document first and then screening? Would this cause you to lose too many participants? Also please distinguish “missing data” vs. “exclusion”. The inclusion/exclusion criteria are poorly organized.	2. I tried to correct it as much as possible - 3. I tried to correct it as much as possible - hypothesis of accordance to pain, I tried to modify and correct this part for more clearance. - There is not any article to effects of MTP to anticipatory postural control, according to we used of other studies such as the effects of back pain to anticipatory postural control. Methods: - At the first stage, subjects found suitable for participants in the study. Then all participants were given a clear explanation
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	Please put all “inclusions” together and all “exclusions” together. Also pay attention to what for both groups, what specific for MTP group, and what specific for control group. Why did you recruit females exclusively? “Convenience” does not appear to justify this. Line 63-64: Why do you have the description of “should not have any active MTP in other muscles” for the control group? Does it mean the healthy participants had MTP in their UT muscle too like the MTP group? See your Table 2. Wouldn't the control group be free from MTP and MTP group only have MTP in UT but not in other muscles studied? Line 59: what does VAS measure? VAS is from 0 – 100. What are the anchors for 0 and 100, respectively? What does “two or three” mean (are you sure it is VAS, not NRS)? Line 77-78: What is the purpose to distinguish between two subtypes of MTP while you did not utilize the information anywhere in the manuscript? Force plate was described in the Methods section but why no results were provided? Suggest to remove force plate-related information. Same for the range of arm motion, speed of movement and etc. Line 108: What are S1 and S2 and what are the purposes? Please describe in details as this is the most important part of testing procedure for this manuscript. Line 119: Normally EMG signal is rectified and then low	of all the steps of the test if they agree with all the work, they are recruited by personal satisfaction in this study. So, they signed the informed consent before taking part in this study. After this step, participants were investigated from inclusion and exclusion criteria. We was estimated the sample size based on the other papers and results of our pilot test. - Pain pressure threshold is difference in women and men. So we chose women for this study. - The correct sentences is: control group be free from MTP and MTP group only have MTP in UT but not in other muscles. - I was wrong in writing. We utilized VAS that it is from 0-100 centimeters. Visual Analogue Scale (VAS) is two or three centimeters during the experiment period. - I corrected it. - I modified it. - I corrected it.
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	pass filtered. Why do you need 20 Hz (I assume low pass) filter before RMS? What is the window size for RMS? Line 121: please provide reference for choosing 3 SD as threshold. Line 114: what is the purpose of 10 repetitions? How did you treat this in your data analysis? Results Table 2: I don't understand why the control group had MTP in UT muscle – "Pre motor time (UT with MTP)" and Motor time (UT with MTP). What are the exact difference between the MTP and control groups? There is no need to provide p value if greater than 0.05. Also please do double check the p values given in Table 2 as they are totally different from what you described in the Results section (all $p < 0.001$ are wrong). Please use period "." instead of slash "/" for numbers in the text body. Discussion: Line 148: There are tons of studies about impact of pain of EMG. Be more specific – should be "impact of MTP on anticipatory response". Your interpretation of study findings (Table 2) is insufficient. You demonstrated that there was no difference in pre-motor time between the two groups. Thus, the delay in initiation of arm motion can only be the result of a longer motor time in MTP group as you have demonstrated. Therefore, your discussion should concentrate on the differences between "pre-motor time" and "motor time", how the CNS controls these two	I was wrong to writing, I corrected it. Data link software is chosen a window 50 milliseconds before is calculated RMS. - Line 121:I added it. - Line 114: Because of variation of muscle activation, we had 10 repetitions until can be chose 3 good signal between them for calculating. Results: I corrected it. I corrected and modified them. 148: I corrected it.
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	variables using different processes, and how MTP mainly affects “motor time” control process but not “pre-motor time”. Any isolated discussion of “reaction time” (i.e. paragraph 3 of the Discussion section) does not make much sense. The fourth paragraph starting at Line 170 does not fit into this manuscript as you did not provide any data on this specific topic (trial to trial difference over time). Please keep a separate paragraph for Conclusions. The first sentence of the conclusion does not convey the study findings well. Need to be more specific. See my comments for Abstract. The Limitations section should involve more discussion. Overall, the Discussion section is fuzzy. More focused discussion is necessary.	- I corrected them. - I modified it. 4. I try to corrected it as much as possible -
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<u>Minor</u> REVISION comments	Table 1 contains minimal information, thus can be described in the text body directly. Reserve tables and figures for more critical information. Table 2: Variables column is not well organized. It would be better to have subsections of “Reaction Time” followed by “Pre-Motor Time” and “Motor Time”. Under the “Pre-motor time” and “Motor time” subsections, list the muscle names one by one.	I added figures and tables for more critical information. I modified them.
<u>Optional/General</u> comments		