

# Review of: "Primary Surgical Treatment of Cleft Palates in the Algerian Hospital Environment"

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**Potential competing interests:** The author(s) declared that no potential competing interests exist.

I congratulate the authors for this valuable study that tries to make a baseline of cleft palate service in Algeria. You are actually making a very good job

There are some comments on the language and in the scientific data as well.

Most of the manuscript needs to be revised by a native English tongue. There is even some French language .... Almost all figures contain French words and this needs to be corrected.

There is some confusion in the incidence of clefting; because the incidence of cleft lip and palate which is around 1 per 700 live births, while the incidence of cleft palate alone is about 1 per 1300 live births or less.

The cleft team is headed by a surgeon (plastic or Pediatric) and should include a pediatrician, an E N T specialist, a speech therapist, an audiologists, a radiologist and a psychologist.

I couldn't understand the meaning of velopalatine incompetence and I think, the authors meant velopharyngeal incompetence (VPI)

Although the Furlow Z veloplasty was previously reported by many authors to be superior to Veau – Wardill - Kilner palatoplasty, However, Furlow Z veloplasty can't be considered as a muscle repair. Sommerlad intravelar veloplasty (IVV) is the only technique that ensure anatomical repair of the palatal muscles.