Review of: "L4-L5 Anatomy Classification System for Lateral Lumbar Interbody Fusion"

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Potential competing interests: No potential competing interests to declare.

Dear authors/editor,

The present work propose a new classification system. The proposed classification is a straightforward method for determining the feasibility of lateral lumbar interbody fusion surgery at L4-L5. It relies on the simple identification of anatomical markers that enable immediate visual recognition of the L4-L5 anatomical type.

However, I would like to provide the following suggestions:

1.The study included fifty participants.35(70%) of the L4-L5 anatomy was type I, 8(18%) were type II, and 6(12%) were type III.

But 35+8+6=49, not 50?.

2.Furthermore, when the surgery performed on each patient was examined, none of those with type 3 anatomy (7/7; six patients had ALIF L4-L5, and one underwent decompression at L4-L5) received a lateral approach.

Please supplement the postoperative outcomes, imaging data, complications, and analysis of these patients after surgery.

3.In addition,can you confirm that there are only three subtypes on the MRI ?