Scientific Quality: Grade B (Very good)
Novelty of This Manuscript: Grade B (Good)
Creativity or Innovation of This Manuscript: Grade B (Good)
Scientific Significance of the Conclusion in This Manuscript: Grade B (Good)
Language Quality: Grade B (Minor language polishing)

Specific Comments to Authors: After examining the manuscript by Dr. Lei Fengrui and associates, I acknowledge their meticulous approach in addressing the intricate nature of treating diabetic foot complications using endovascular and surgical revascularization methods. The authors aptly highlight the multidisciplinary approach employed, ranging from computed tomography angiography (CTA) diagnosis to tailored endovascular interventions and extensive wound care practices. Their case presentations reveal a thoughtful strategy for dealing with challenging arterial obstructions in diabetic patients, such as patenting the posterior tibial artery and peroneal artery through balloon angioplasty, sometimes necessitating innovative techniques like retrograde puncture. The integration of VAC therapy in the postoperative period, as shown in Figures 3 and 4, underscores the importance of holistic care in improving outcomes. The study provides a detailed description of the treatment methods employed, including revascularization techniques, wound repair strategies, and follow-up protocols. This level of detail enhances the reproducibility of the study and facilitates its implementation in clinical practice. Further research, including prospective multicenter studies with longer follow-up periods, is warranted to confirm these findings and establish the optimal management approach for diabetic foot patients.

Reply: Thank you for you precious time reviewing our manuscript, we appreciate for your affirmation of this study. Due to the nature of retrospective study does not allow randomization of patients, to further demonstrate our findings, a well-designed, randomized, and controlled trial with prospective data collection and sample size calculation is needed and hopefully establish a optimal management approach for diabetic foot patients.

Scientific Quality: Grade C (Good)
Novelty of This Manuscript: Grade B (Good)
Creativity or Innovation of This Manuscript: Grade B (Good)
Scientific Significance of the Conclusion in This Manuscript: Grade B (Good)
Language Quality: Grade B (Minor language polishing)

Specific Comments to Authors: Title: Clinical efficacy of Endovascular Revascularization Combined with Vacuum-Assisted Closure for the Treatment of Diabetic Foot. This study by Lei et al. presents a retrospective analysis of 40 diabetic foot patients treated with endovascular
Revascularization (ER) combined with vacuum-assisted closure (VAC). The study evaluates the efficacy and safety of this combined approach in improving limb salvage rates and wound healing outcomes in diabetic foot patients. The results indicate a high success rate of limb salvage (95%) and wound healing (100%), highlighting the potential benefits of ER combined with VAC in the management of diabetic foot. The study comprehensively addresses various aspects of diabetic foot management, including infection assessment, glycemic control, revascularization, and wound repair. This comprehensive approach reflects the complexity of diabetic foot management and provides valuable insights for clinicians. The study reports favorable clinical outcomes, including a high success rate of limb salvage and wound healing, which are crucial endpoints in diabetic foot management. These outcomes suggest the effectiveness of the ER-VAC combination in improving patient outcomes. Lei et al.'s study contributes valuable insights into the clinical efficacy of endovascular revascularization combined with vacuum-assisted closure for the treatment of diabetic foot. Despite certain limitations, the study demonstrates promising outcomes in terms of limb salvage and wound healing rates. Overall, this study highlights the potential of the ER-VAC combination as a valuable treatment strategy in diabetic foot management.

Reply: Thank you for your precious time reviewing our manuscript, we appreciate for your affirmation of this study. However, this study still have some limitations, due to the nature of retrospective study does not allow randomization of patients, thus further demonstrate our findings, a well-designed, randomized, and controlled trial with prospective data collection and sample size calculation is needed and hopefully establish a optimal management approach for diabetic foot patients.