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## Response to Letter to Editor: '2-year outcome from two parallel randomized controlled trials. Reporting considerations

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## **Accepted Manuscript**

Response to Letter to Editor: '2-year outcome from two parallel randomized controlled trials. Reporting considerations'

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- 1 Response to Letter to Editor: '2-year outcome from two parallel randomized controlled trials.
- 2 Reporting considerations'
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25	Dear Editor,
26	We thank Nguyen et al. <sup>1</sup> for their interest in our recent publication in Osteoarthritis and Cartilage
27	entitled "Total knee replacement and non-surgical treatment of knee osteoarthritis: 2-year outcome
28	from two parallel randomized controlled trials" <sup>2</sup> .
29	We do agree with the authors that clarity and transparency are crucial when reporting research
30	findings. We believe our report from the two, parallel randomized controlled trials is adequate in
31	terms of the comments given and aligns with best practice.
32	First, in the title, abstract, main text and in the figure legends, we clearly state that we are reporting
33	the results from two parallel randomized controlled trials. Furthermore, both trial registration
34	numbers are stated at the end of the abstract as required by Osteoarthritis and Cartilage and
35	suggested by CONSORT. In the introduction and methods, we provide a thorough and transparent
36	description of similarities and differences between the two trials. Based on our reporting, we find it
37	difficult to believe that a reader would misinterpret this as a single four-arm trial. Second, to
38	highlight that this is an extended follow-up of the two trials we refer to the primary reports <sup>3,4</sup> in the
39	introduction and the methods. As written by Nguyen et al,1 we clearly defined the primary outcome
40	in this extended report as the between-group difference in change in Knee Injury and Osteoarthritis
41	Outcome Score subscales, covering pain, symptoms, activities of daily living, and quality of life
42	(KOOS <sub>4</sub> ) at 24 months while the primary endpoint of the two trials was the mean between-group
43	difference in change in the KOOS <sub>4</sub> at 12 months.
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48	None for this letter.
49	AUTHOR CONTRIBUTIONS
50	Study conception and design. Skou, Roos, Laursen, Rathleff, Arendt-Nielsen, Rasmussen,
51	Simonsen
52	Drafting the letter or revising it critically for important intellectual content. Skou, Roos,
53	Laursen, Rathleff, Arendt-Nielsen, Rasmussen, Simonsen
54	Final approval of the letter. Skou, Roos, Laursen, Rathleff, Arendt-Nielsen, Rasmussen,
55	Simonsen
56	All authors take responsibility for the integrity and accuracy of the content.
57	
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60	The Health Science Foundation of North Denmark Region, Obel Family Foundation, Foot Science
61	International, Spar Nord Foundation, The Bevica Foundation, The Association of Danish
62	Physiotherapists Research Fund, Medical Specialist Heinrich Kopp's Grant, and The Danish
63	Medical Association Research Fund.
64	Søren Thorgaard Skou is currently supported by the Danish Council for Independent Research
65	(DFF – 6110-00045) and the Lundbeck Foundation.
66	ROLE OF THE FUNDER/SPONSOR
67	The funders played no role in drafting this letter.
68	CONFLICT OF INTEREST
69	Dr. Roos is deputy editor of Osteoarthritis and Cartilage, the developer of Knee injury and
70	Osteoarthritis Outcome Score (KOOS) and several other freely available patient-reported outcome

- 71 measures and co-founder of Good Life with Osteoarthritis in Denmark (GLA:D), a not-for profit
- 72 initiative hosted at University of Southern Denmark aimed at implementing clinical guidelines for
- osteoarthritis in clinical practice.
- 74 Dr. Skou is associate editor of Journal of Orthopaedic & Sports Physical Therapy, have received
- 75 grants from The Lundbeck Foundation, personal fees from Munksgaard, all outside the submitted
- work. He is co-founder of GLA:D. GLA:D is a not-for profit initiative hosted at University of
- 77 Southern Denmark aimed at implementing clinical guidelines for osteoarthritis in clinical practice.
- 78 The authors report no other conflict of interest.

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