

## PEER REVIEW HISTORY

BMJ Open publishes all reviews undertaken for accepted manuscripts. Reviewers are asked to complete a checklist review form (<http://bmjopen.bmj.com/site/about/resources/checklist.pdf>) and are provided with free text boxes to elaborate on their assessment. These free text comments are reproduced below.

### ARTICLE DETAILS

<b>TITLE (PROVISIONAL)</b>	The German Cranial Reconstruction Registry (GCRR): protocol for a prospective, multicentre, open registry
<b>AUTHORS</b>	Giese, Henrik; Sauvigny, Thomas; Sakowitz, Oliver; Bierschneider, Michael; Güresir, Erdem; Henker, Christian; Höhne, Julius; Lindner, Dirk; Mielke, Dorothee; Pannewitz, Robert; Rohde, Veit; Scholz, Martin; Schuss, Patrick; Regelsberger, Jan

### VERSION 1 - REVIEW

<b>REVIEWER</b>	S. Anthony Wolfe, M.D. Miami Children's Hospital Miami, Florida USA
<b>REVIEW RETURNED</b>	16-Jul-2015

<b>GENERAL COMMENTS</b>	It is worthwhile to put together a multi-center registry for patients undergoing cranioplasty. The data will have to be maintained up to date for at least 20 years before meaningful conclusions can be made. A comparison of early results comparing autogenous reconstruction with alloplastic materials may not show any significant differences at first, but over the ensuing years more and more of the alloplastic constructs will continue to have failures, whereas autogenous reconstructions, if they make it through the initial few months without problem, but not show late failures. It would be interesting to see if any of the participating institutions perform autogenous reconstructions.
-------------------------	---

<b>REVIEWER</b>	Angelos Kolias Division of Neurosurgery, University of Cambridge, UK  I am a member of the UKCRR steering group.
<b>REVIEW RETURNED</b>	13-Aug-2015

<b>GENERAL COMMENTS</b>	<ol style="list-style-type: none"> <li>1. I think the authors should just use the term registry throughout the paper for consistency.</li> <li>2. It should be mentioned that DC is also routinely used for patients with traumatic acute subdural haematomas <a href="http://www.ncbi.nlm.nih.gov/pubmed/22527581">http://www.ncbi.nlm.nih.gov/pubmed/22527581</a></li> <li>3. I would not say that this is a single arm study – this is a procedure-specific registry.</li> <li>4. In table 1, I am not sure what age of legal majority means.</li> <li>5. In the abstract it is stated that “scheduled monitoring will be done</li> </ol>
-------------------------	--

	<p>at time of inclusion and subsequently at any surgical procedure until discharge, at any clinical re-admission and at follow-up presentation". However, the text (page 12) describes a 30-day follow-up visit, 1-year follow-up (post-cranioplasty) and annual follow-up thereafter. Can the authors clarify what the proposed follow-up is as the two statements do not seem to agree.</p> <p>6. The data collection section would be clearer if subheadings were used.</p> <p>7. I would change the "Publication of the trial results" heading to "Registry reports".</p>
--	---

## VERSION 1 – AUTHOR RESPONSE

Comment to Angelos Kolias:

1-7.) Thank you for your constructive suggestions. We have implemented all points into the manuscript.