

## Review report

Final title: **Rehabilitation of a repatriated worker with spinal cord and brain injuries in a low-resource setting: A case report**

**Title at submission: Rehabilitation of a repatriated worker with spinal cord injury and brain injury, a model for multidisciplinary care in low-resource settings: A case report**



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**Responsible editor**  
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**Reviewers**  
A: Julia Patrick Engkasan  
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**Keywords**  
spinal cord injury, traumatic brain injury, multidisciplinary rehabilitation

**Ethical approval**  
Ethical approval was not sought because this is a case report. However, written informed consent was obtained from the patient for publication of this case report and any accompanying images.

**Funding**  
None

**Trial registration number**  
Not applicable

**Reviewer A: Julia Patrick Engkasan, ORCID: [0000-0003-0599-4908](https://orcid.org/0000-0003-0599-4908)**

**1. Comment** To find a focus and elaborate on the uniqueness of this case.

**Response** The focus and the uniqueness of this case has been elaborated.

**2. Comment** Think back-why do you want to report this case? What is different from your usual case or the usual case in Bangladesh?

**Response** We have rewritten to focus on functional gains when rehabilitation is coordinated, patient-centered, and family-supported.

**3. Comment** Please rewrite the manuscript according to the focus that you feel would be worth reporting.

**Response** Most of the manuscript has been rewritten, and the current version is submitted.

**Reviewer B: Anika Tasnim, ORCID: [0000-0002-4983-0086](https://orcid.org/0000-0002-4983-0086)**

**4. Comment** The Key Messages section (lines 21–26) is relevant and well aligned with BSMMUJ guidelines but could be more concise and focus on the clinical learning point rather than general advocacy.

**Response** We have rewritten the key message of the manuscript (Lines 16-20).

**5. Comment** The introduction (lines 30–40) provides relevant context about pelvic fractures, assistive device gaps, and rehabilitation needs. It is well written and logically structured, though somewhat global in focus. It could better articulate the unique clinical problem faced by this patient rather than a broad overview of rehabilitation needs.

**Response** We have included healthcare guidance problems (Line 27-30 ).

**6. Comment** The conclusion (lines 92–96) restates the central message but is redundant and narrative rather than analytical. It acknowledges a limitation (line 96), but the limitation is not deeply examined, nor tied to its clinical impact.

**Response** We have rewritten the section (Lines 90-96).

**7. Comment** References are recent, relevant, and appropriately cited (lines 115–140), including WHO documents and recent reviews. However, several web resources may be less rigorous (Lines 121–126), though acceptable for contextual data.

**Response** We have checked and revised the References for accuracy.

**8. Comment** Figure 1 (Lines 144–145) is relevant, but Lacks annotation.

**Response** The annotation has been added in the Figure 1.

**9. Comment** No objective clinical outcomes (pain reduction, gait status, independence level), No clinical follow-up data, Omission of biomechanical assessment and risk evaluation.

**Response** We have included the outcome parameters (Lines 66-70).

**Responsible editor: Taslim Uddin, ORCID: [0000-0002-2884-9212](https://orcid.org/0000-0002-2884-9212)**

**10. Comment** Please add an abstract (within 200 words) for the case report, structured under the subheadings Background, Case Description and Management, and Conclusion.

**Response** The structured Abstract has been added in the revised manuscript.