

Lumbar degenerative spondylolisthesis (LDS)<u>, i.e., is an the</u> acquired slippage of one lumbar vertebra on over the one below it the lower one as the result of because of degenerative instability; in the absence of a defect in the pars interarticularis, The disease is a condition frequently seen observed in middle-aged and oldelderly-aged females, and patients Some patients with LDS may not present with any may have no clinical symptoms. Most of the time, the sSymptomatic patients generally respond well to non-surgical treatments, such as which include lifestyle modification (reducing environmental pain generators), medication, physical therapy, weight reduction, multidisciplinary pain eliniesmanagement, or epidural injections.

In Surgery may be necessary in refractory eases patients with intolerable symptoms, such as (a <u>a</u> dramatic decline in quality of life, unresponsive to a reasonable trial of >3 months conservative treatment, rest pain, progressive neurological deficit, or sphincter disturbances), or in patients who are unresponsive to a reasonable trial of >3 months of conservative treatmentsurgery may be necessary. At the present timeCurrently, 70-%\_80% of the surgically treated patients have a report satisfactory outcomes, but due tobecause of the continuing degeneration we process, the results outcomes get worse worsen over time. Common Poor poor prognostic factors commonly quoted for the surgically treated patients with surgical treatment, include age >65 years, symptom chronicity of symptoms.>24 months, instrumentation >\_4 levels, inability to restore sagittal balance, comorbidities >\_4, more preoperative back pain more than leg pain, posterolateral versus 360° fusion-versus 360 degrees, intermittent claudication after walking for more than several hundred meters, previous surgery, and inability to fuse. A range of Many surgical techniques, including indirect reduction, decompression and slip reduction plus instrumented fusion, has have

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**Comment [Editor2]:** In academic writing, text should be presented in a concise manner wherever possible to aid readability.

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been used for surgical treatment of for treating\_LDS. These include indirect reduction alone, decompression alone, decompression plus lumbar fusion with or without instrumentation, decompression and slip reduction plus instrumented fusion. In this study, we aimed<u>We aimed</u> to evaluate the surgical outcome<u>s</u> of <u>patients with</u> degenerative spondylolisthesisLDS with following\_neural decompression, pedicular screw fixation, and posterolateral fusion.

**Comment [Editor3]:** Two sentences have been combined and text has been re-arranged here so that the examples of surgical techniques are provided immediately after the mention of the term.

**Comment [Editor4]:** Abbreviations are usually spelt out once at their first mention in the text, and the abbreviated form is used consistently thereafter. As LDS has already been defined above as "lumbar degenerative spondylolisthesis," only the abbreviation has been used at this instance.

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