

This paper addresses an important topic and provides some much needed information to identify injury prevention targets in Gaelic football. The inclusion of the figures was beneficial and the analysis was well completed. Below find some specific comments that I hope the authors will find useful when preparing their revisions.

## **Abstract**

1. Line 36: Remove “-“.

## **Introduction**

1. Line 50: overtime should be split into two words.
2. Line 51: I don't think you need the inclusion of an example of an injury, over complicates the sentence with your other brackets included.
3. Line 52: I think instead of “can then be..” it should read “should be directed towards..”
4. Line 55: spelling
5. Lines 56-66: I fully agree with the point being stated here and the importance of injury prevention programme targeting injuries that occur frequently or have a high injury burden. However recent research has shown that ACL injuries have increased by 147% in the last 10 years in children and adolescents across all physical activity levels and sports (Shaw and Finch, 2017) and ACL injuries are more frequent in females. This study is focusing on a different population than this, so this example is appropriate, however I think the authors should stress more that in the population they are dealing with, it may not be key i.e. specifically state elite male adult Gaelic footballers.
6. Line 63-64: This sentence is rather confusing the way it is structured at present and may need to be split up or expanded. What is meant by critiquing team practices using comparisons to pre-existing values? Does this mean examining whether certain teams have higher injuries than a normative value? Not clear.
7. Line 67: associated with. Also avoid using specific twice in one sentence. Particular etc.
8. Line 70: encompassing
9. Line 70-71: I think more is required here. What has been done in Gaelic football? I think the gap needs to be highlighted here more. Research has solely focussed on examining... however, the injury profile of specific activities has not yet been examined in elite Gaelic footballers.
10. Lines 71-73: The aim in my opinion does not seem to clearly match the title or fully explain the actual analysis completed. I would advise expanding the aim as it will help the reader fully understand what the study wants to examine.

## **Methods**

1. Line 85-86: Some information on the team data sets from the 17 teams is required as not all teams must have completed for the full time period based on 38 datasets being included. At least information on the average years and SD for teams included in the analysis. Potentially might be more appropriate in a figure?
2. Line 92: non-compliant – spelling. So to confirm, non-compliant teams were excluded based on the medical staff not confirming that all data was included?

3. Line 98: How were clinical entities defined? Using what coding system or a system generated by the authors?

## **Results**

1. Line 124: I would remove the brackets from all lower limb and incorporate it into the sentence
2. Line 127: include of all injuries after the 40.9%
3. Line 128: This is merging a bit of discussion to the results, re-word.
4. Line 133-134: Re-word here – the beginning of the sentence is merging two ways of starting it.
5. Line 137-141. Very long sentence, I would split it.
6. Line 163: Has this information been reported and published previously? If this data set has been reported in a previous manner and this finding included this should be removed (it might not have been however and new findings may be included in this).
7. Table 2: Is the comma required between the location and the %. Instead I would suggest just including a separate column for injury site.
8. Table 3 Further information is required either as a note at the bottom of the table or in the top row stating % and (95% confidence interval) or median (IQR). This should be highlighted clearly.
9. Table 4: As per previous comment, ensure the reader is clear as to what is a median (IQR) and what is % (95% CI).
10. Table 5: Important to specify to reader underneath the table what NC : C IRR and A : C/O IRR mean. Also define IRR below.
11. Table 6: As per previous comment, define MP : TR IRR below the table.
12. Table 7: This table should be included as landscape to improve its readability. As per previous comments, anything shortened down should be defined below the table.

## **Discussion**

1. Lines 201-204: I think it is important for the authors to further attempt to discuss this finding and include/expand some reasoning for this finding.
2. Lines 2017-209: Should the reference be moved to be after 72 hours? Review and consider.
3. Lines 220-222: develop rather than developed.
4. Line 223: Remove the word “indeed”
5. Lines 224-226: Remove “as it is unlikely.....”
6. Line 227: at a greater risk..
7. Line 228: While
8. Line 228-230: Is the meaning here that most screenings occur during pre-season where match-play exposures are not frequent, if so I would consider stating it more clearly.
9. Line 243: is the initial step in prevention...
10. Line 263: efficacy? Effective?
11. Line 258: Consensus on the management is required to be expanded and further explained by the authors.
12. Line 268: include the word injuries after common.
13. Line 273: processes – spelling

14. Line 272-273: This point needs to be expanded, what is meant by minimum reporting standards etc.
15. Lines 292: times not time

### **References**

Unless I am mistaken references 3, 14, 15 and 28 are not actually referenced in the text. Please re-check.