Brazilian Dental Science

Subject: [BDS] Editor Decision

Dear Priscila Hernández de Campos, Mayra Manoella Perez, Renata Oliveira Guaré, Adrian Lussi, Eduardo Bresciani, Michele Baffi Diniz:

Your submission Efficacy of fluoridated toothpaste with or without arginine on the remineralization of white spot lesions in primary teeth: a randomized controlled clinical trial to Brazilian Dental Science, has been revised and according to reviewers' comments, there are questions to be addressed and/or points to be clarified/corrected.
Please answer the reviewers considerations point-by-point in a separate document and also please make all the corrections in the text highlighted in yellow.

Deadline: 30 days

Thank you for considering Brazilian Dental Science for publishing your research.
We are looking forward the revised version of you manuscript.

Sincerely,

Reviewer A:
Recommendation: Revisions Required

Comments to the Author

Dear authors, thank you for submitting this manuscript. It is very well done and written. Although some improvements are necessary.

Abstract:

Objective: After reading the manuscript and according to my understanding the

comparison between the two toothpastes is more related to your objective than the evaluation of efficacy of both. Maybe, efficacy is a secondary objective.

Conclusion: The conclusion is answering to the comparison between the toothpastes. I suggest you think about the objective as I said before.

Material & Methods:

Are consent forms presented only for parents or legal guardians? Did you give assent forms for the child? I suggest you explain and justify this decision.

Ethics Committee suggests the use of an assent form for children and adolescents as written on the resolution 466/2012, “assent forms should be presented for children, adolescents ... These participants should be informed about the nature of the research, its objectives, methods, expected benefits, potential risks, and the discomfort it may cause them, to the extent of their understanding, and their individual characteristics should be respected”.
Please see the reference: https://www.gov.br/conselho-nacional-de-saude/pt-br/atos-normativos/resolucoes/2012/resolucao-no-466.pdf/view

It is missing a better explanation about the reason for selecting those four schools in a specific region. I suggest you add this to your paper.

The parents who were unable to attend the meeting, did they receive the same information as the others? How can it impact on the results as the study depends on parents’ supervision for toothbrushing?

Did you have any participants who asked for more toothpaste? How did you deal with the situation and what impact does it bring to your study?

Was the same examiner who took the photos?

Results
How many children were initially enrolled in included preschools?

Discussion

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The first paragraph is already written in the introduction, I suggest you focus the discussion on exploring your results.

In the methods you say that parents who attended the initial meeting received recommendations for a healthy diet, can it impact on your results?

Are the methodological steps for asses the supervised toothbrushing at home enough to guarantee the objective of the study?

You say: “In the school environment, toothbrushing was mainly performed by children under teacher supervision, which may have influenced outcomes.”
It is missing a better explanation of how the results may be influenced. Also, I suggest bringing this discussion for the home supervision.

Your study focused on a single region, and this can be considered a significant limitation since it prevents the extrapolation of data and generalization of results. I suggest that this limitation also be reported along with the limitation where you claim the lack of assessment of socioeconomic differences.

Formatting:
The manuscript text is double-spaced with 14-point Arial font – Please be sure that this is correct in the manuscript.

Reviewer B:
Recommendation: Revisions Required

Comments to the Author

I congratulate you on the research, the topic is relevant and has the particularity of evaluating preschool-aged children, for whom caries prevention is essential,

especially considering the potential for less cooperative behavior in cases of deeper carious lesions that require more invasive treatment. Overall, the text is clear and well-structured, however, some errors and suggestions need to be addressed.

1. In the Portuguese abstract, in the Methods section, the acronym for white spot lesion appears in English.

2. Was the examiner calibrated for both DMFT/dmft and ICDAS? Please clarify this point in the methodology.

A question for the authors: What is the actual relevance of assessing dental caries using the DMFT/dmft index, considering that the proposed treatment targets enamel white spot lesions, which correspond to ICDAS scores 1 and 2? The DMFT/dmft index classifies only cavitated teeth as carious, which was not the focus of the study.

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