Answers for reviewers

**Reviewer B:**

The article needs proofreading of English?:

 YES

Comments to the Author:

**Answer:** The English was reviewed.

**Reviewer C:**

Comments to the Author:

 In my opinion this study do not have a clear objective. Even though the

authors stated that the aim is to used botulinum toxin like a prophylactic

treatment to protect zygomatic implants, they also stated that the

percentage of failure os these implants is really low; therefore, why to

apply botulinum toxin for this purpose? Occlusal adjustment is not enough

with a better cost benefit ratio?

The results do not bring anything new, since it is expected that botulinum

toxin reduced muscle contraction and force.

Also EMG is not the proper tool to assess occlusal clenching; there is a

validated protocol to evaluated this variable with other devices.

My major concern is about the knowledge of the authors about the possible

side effects of non-sense injections of BoNT-A in masticatory muscles like

the ones reported in this study. There are experimental studies and also

some clinical studies reporting loss os cortical and trabecular bone after

botulinum toxin injections due to the lack of stimulation coming from the

paralyzed muscles.

I do not recommend accepting this study for future publication, since it

could be understood by the readers as a recommendation of the journal to use

BoNT-A for incorrect purposes like the ones reported in this study.

**Answer:** There is a difference between the implant failure and the prosthesis over implants failure. The objective of this study is to purpose the use of BoNT-A as a prophylactic treatment to protect the prosthesis, by modulation of muscle strength, in cases in which the oclusal adjustment is not sufficient to stop the prosthetic failures.

**Reviewer E:**

Comments to the Author:
TRABALHO EXCELENTE E DE EXTREMA RELEVÂNCIA
CONSIDERAÇÕES
Há quanto  Tempo, em média, os pacientes estavam reabilitados?
A discussão precisa ser confrontada com a literatura.
O restante está ok, parabéns

**Resposta:** Os pacientes estavam reabilitados em média há 1 ano, sob falhas protéticas que não foram cessadas com o ajuste oclusal minucioso, devido ao excesso de força mastigatória decorrente da ausência de propriocepção dos implantes. A discussão foi revisada junto a literatura. Agradecemos as considerações.