

Review Form 1.6

Journal Name:	Journal of Pharmaceutical Research International
Manuscript Number:	Ms_JPRI_81693
Title of the Manuscript:	CARIES RISK ASSESSMENT AND DETECTION OF STREPTOCOCCUS MUTANS COUNT IN PLAQUE AND SALIVA USING MUTANS-SANGUIS AGAR
Type of the Article	

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	<p>Some important details are missing from the "Materials and methods" section:</p> <ul style="list-style-type: none">-How many examiners participated? If there were several examiners, were they pre-calibrated?-clinical examination - under what conditions was it performed? What criteria were considered? Were radiological examinations also used?- xerostomia assessment (indicated in the ADA caries risk assessment form) - how was it done?-what were the exact conditions for collecting the bacterial plaque? Have the dental surfaces been dried before?- what other conditions were observed for the collection of samples (eg, if patients were advised not to brush their teeth that morning, if they were advised not to eat food before collection, etc.)-the value of the cut-off point of statistical significance "<i>p</i>" must be specified- the number of the document representing the approval of the ethics commission must be indicated- the study protocol should be described in more detail-the section contains a very large number of photos, which do not find their utility. <p>In the "Results" section:</p> <ul style="list-style-type: none">-table 1, graph 1, table 2 and graph 2 describe the same results, which are also presented in text form. Authors should decide on a single form of presentation of a set of results: e.g., a summary table-tables 3, 4, 5 - requires a clearer presentation of the data - it is not understood what it means. Table 4 does not specify what the middle column represents-table 6A - MS density is expressed only in CFU (we assume that the authors wanted to express in CFU / ml). The same confusion is present for the other tables, as well as in the graphs-table 6B shows the same data as 6A; in addition, in both it says "among the study group", but there are only 20 subjects. The data probably refers to the control group, but this is not specified.-Tables 7A and 7B show the same data; the same goes for the sets of tables 8A and 8B, 9A and 9B-the data contained in tables 12, 13, 14, 15, 16 and 17 could be much more synthetic and clearly presented in the form of a single table. The same goes for tables 18, 19, 20, 21, 22, 23.- Graphs 4 and 5 compare the "<i>p</i>" values – this is unusual- the Results section does not contain any data regarding the dental clinical examination. It would have been very useful to correlate the data with this very important parameter of oral health, especially given that previous caries experience is an important predictor of future caries lesions.-table 24 contains data on "Average mean value of CFU / ml" - in what (saliva or bacterial plaque)? <p>In the "Discussion" section:</p> <ul style="list-style-type: none">-page 48 - the authors say that "Very few studies have highlighted the risk factors affecting dental caries". In fact, there are many studies in the literature that have looked at these issues over time-page 9, paragraph 2 - the phrase from the chapter "Introduction" is repeated. In fact, some other phrases from the rest of the article are repeated in the "Discussions" section.-page 54, paragraph 1 - refers to an age group that is not included in the present study (12 years). In addition, the percentages presented refer to the Cariogram, a	<ul style="list-style-type: none">- References in bibliography has been revised- English corrections have been done to the best of our abilities.- submitted for statistical analysis using SPSS V 22.0. ANOVA and T-test were performed for statistical significance with the cut-off <i>p</i> value of 0.05.- Additional photos were removed.- Total graphs and figures have been reduced.- Content has been modified.- It was an analytical study and ethical clearance was obtained from the institutional ethical committee. Institutional ethical clearance was obtained vide SDCRI/IEC/2018/016.- Our participant age group ranged from 16-60 years. The examination, caries risk assessment, plaque and saliva sample collection were performed by two trained examiners. As we had used only saliva and plaque samples, it did not have any rejection requests by the participants.- Clinical examination was performed in a routine dental chair under normal lighting conditions. No specific instructions or conditions were given for saliva and plaque collection as relevant exclusion criteria were applied before participant selection. Xerostomia assessment was based on the patient history of dryness, mucosal changes and salivary characteristics. Plaque collection was performed in the buccal surfaces of premolar and molar teeth without any drying.

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	<p>different form of caries risk assessment.</p> <p>Many references in the "Bibliography" section are old or very old.</p> <p>The English language needs correction in some places.</p>	
<p>Minor REVISION comments</p>	--	
<p>Optional/General comments</p>	--	

PART 2:

	<p>Reviewer's comment</p>	<p>Author's comment <i>(if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)</i></p>
<p>Are there ethical issues in this manuscript?</p>	<p><i>(If yes, Kindly please write down the ethical issues here in details)</i></p>	<p>No ethical issues. Ethical clearance was obtained from the institutional ethics committee.</p>