Author’s response to reviews

Title: Five-year follow-up of children receiving comprehensive dental care under general anesthesia

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Author’s response to reviews: see over
Dear Dr Marshman,

Attached, please find our revised manuscript entitled "Five-year follow-up of children receiving comprehensive dental care under general anesthesia".

We gratefully thank the referees’ for their valuable comments and suggestions. The manuscript has now been carefully prepared taking into account all the comments. The changes in the manuscript are highlighted in yellow. We hope that the paper now is in acceptable form and can be published in the BMC Oral Health. Below are our point-by-point responses to the referees’ comments:

Sincerely yours,

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Referee 1:

1. P7 Line 158 What types of filling therapy were provided under DGA?
   We have added this information P7 Lines 163–164.

2. P8 Line 180 What is conscious sedation used during the follow up?
   We have added this information P9 Line 189.

3. P9 Line 197 "Previously received conscious sedation (65%) and DGA (13%) were more frequent among the 6-13-year-olds than among the younger patients (p<0.001).
   According to Table 1, the percentage for conscious sedation should be 80% and previous DGA 23%. Pls check.
   Thank you for pointing out our mistake. The text has now been corrected P9 Line 208.

4. P12 Line 257 Was any correlation test being done (r=0.48)? It was not mentioned in the statistical analysis on P9.
5. P12 Line 255 How was the control of dental fear performed during follow up for different age groups?
The control of dental fear has been performed similarly in both age groups. This is explained in methods P9 Lines 192–193.

6. Figures 2 and 3 Pls label the X and Y axes.
The figures have now been revised.

**Referee 2:**

1. Please review the choice of English language used? I have given a few examples. It may help for a native English speaker to read the paper.
The language used is American English. It has been revised by experienced native speaker, who works at the Language Centre of the University of Helsinki.

2. Please review the statistical section – I am uncertain what your primary outcome was when undertaking these statistical tests – for example the logistic and linear regression. Secondly you have a large number of variables, please comment on any adjustment you made for multiple testing
Under the writing process we used linear regression modeling, but no more in the final ms. This has now been corrected to statistical analysis P9. Mostly, the variables were used as two-by-two cross-tables. In the logistic regression modeling the outcome variables were dichotomized in two separate ways. See P12 first paragraph.

3. Please review your aim – do you mean the outcomes of dental care or the treatment provided?
The aim has now been revised.

4. Please clarify for readers who are not familiar with Finnish dental system – what does sedation means – is this inhalation sedation, oral midazolam, rectal midazolam.
It is oral midazolam. This information has been added P7 Line 153 and P9 Line 189.

5. Please clarify who plans and provides the dental care under general anaesthetics – have they undergone specialist training in paediatric dentistry?
This information has been added P6 Lines 128–129.

6. Please clarify – counting of tooth treatment, can the tooth be counted more than once e.g. if a tooth has an endodontic procedure and a preformed metal crown – what is this counted as
This is now explained P8 Lines 166–167.

7. Please detail in the broad summary what proportion of fillings were stainless steel crowns and what proportion were plastic restorations
Our scope was not to study the materials used in filling therapy.

8. How many had bitewings prior to or during their general anaesthetic
We did not record radiographs prior dental general anesthesia. Under general anesthesia there were very few radiographs.

9. Does the further treatment relate to fresh caries or does it relate to further work on the already restored tooth
The text has now been revised P8 Line 175.

10. P6 L125 and P8 L176 – would change wording to robust or rigorous -? May be beneficial to mention the appropriate and regular use of fluorides
The wording has been changed as suggested and information has been added P6 Lines 127–128 and P8 Lines 183–184.

11. P6 – L138 – what was the reason for dropouts?
This information has now been added P7 Line 143.

12. P7 L142 – English
Non – cooperation – change to uncooperative, how was extreme dental fear measured or are they simply tick boxes completed on a GA referral form
The wording has been changed as suggested. General anesthesia referrals are in free-text format. This is explained now P7 Line 158.

13. What is control of dental fear visit – do you mean behaviour management and acclimatisation
Control of dental fear visit is a visit to guide the patient in controlling his/her dental fear, e.g. visit to familiarize the patient with the dental office and equipment.