Author's response to reviews

Title: Preventive oral health practices of school pupils in Southern Nigeria

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Author's response to reviews: see over
RESPONSES TO Reviewer’s comments:

Thanks once again for the thoroughness of the review. We do acknowledge that the
review have significantly improved the quality of the paper. Below are highlights of how
all the comments have been addressed by the authors. The authors’ responses are
highlighted in red below.

Some language errors still persist (see f i p5, §5, line 3 – “administered” shall be
“administer”) – This has been addressed along with other spelling errors identified

Introduction

P3, §2, last line: #20 and 21 deal with alcohol related diseases. This has been lost in the
revision. Appropriate references which addresses smoking and oral cancer have been
included

P3, bottom of page: the term “self-care health care” is probably meant to be “oral self-
care” edit effected

Methods

P4, §2: Even if well-known to most potential readers, DMFT shall be explained. Done

The following is attended to in some aspects but not in all: “The dichotomizations of
questionnaire items are still not specified (which were the original options before
cutoffs were decided?).” Specifically, please see p6, §3: which were the options for the
pupils to answer regarding *tooth-brushing (twice a day/once a day/once a
week/seldom or never?), **use of fluoridated toothpaste (the same options perhaps?)
and ***consumption of sugary snacks between meals (the same options or other?). The
dichotomization of question on tooth-brushing, flossing, use of fluoridated tooth paste
and consumption of sugary snacks between meals have been included. This information
can be seen on pages 6 and 7 of the manuscript.

There is still some confusion about the median age. In page 7, §2, citation: “The median
age for the study group was 10 years”. In page 8, §1, citation: “The mean age for the
group was 11.1 ±2.4 years while the median age was 11 years”. This has been corrected.
The median age on page 7 has been corrected to 10 years.

P8, §4, line 3: wrong sign for percentage. Corrected

Table 2: I suggest that the reference groups could be mentioned in a footnote:
“Reference groups: ‘male sex’ and ‘age 11-16’. Statistical significances can be left to the
reader to interpret that is, no “stars” are actually needed. The 2 and 3 already have the
reference group identified in the table. Adding additional information on the reference
group as a footnote is not considered necessary since this has been done in the table.
The stars from table 1 has been deleted but now highlighted.
Discussion
P9. §2: references have not been kept in the revision. Especially sentence 3 needs one. References included.

P9, bottom: restrict to context (Nigerian pupils). The irrelevant phrase has been deleted and discussion context limited to Nigerian pupils.

Tables 2&3 are revised as pointed out. The legibility of the tables is enhanced however, there is one most important issue: the confidence intervals are removed both in the tables and in the text. This is a deterioration and was not requested. In this case, specifically one 95% CI including 1 is hidden. I commented that this was not to regard as statistically significant, but still this was advocated by the authors. The confidence interval has been included in the table and also included in relevant sections of the manuscript (all highlighted in red). The authors once again noted that CI including 1 does not imply non-statistical significance. Confidence interval gives an estimated range of values calculated from a given set of sample data. It is the interval or width around an estimate. The width of the confidence interval gives an idea of how ‘reliable’ the reported data should be as it is a reflection of the power of the study. CI can or may not include 1. However, when a negative confidence interval is reported in a clinical trial, that should raise some concern as this may indicate that there is harm. We beg to differ on this point. Figures were also all reduced to a single decimal space.

We look forward to a positive response from the journal

Yours sincerely,

Dr MO Folayan
For the authors