Author’s response to reviews

Title: Utilization of the Atraumatic Restorative Treatment approach in a group of public oral health operators in South Africa: a 5-year longitudinal study

Authors:

Steffen Mickenautsch (neem@global.co.za)
Jo E Frencken (neem@global.co.za)

Version: 2 Date: 12 February 2009

Author’s response to reviews:

We like to start the response by expressing our thanks to the reviewers for spending their time reading our work and reporting on areas that require improvement; much appreciated.

A. Reviewer’s report: Kilpatrick N

à 2.

The study aim was to report the 5-year restorative treatment pattern of operators who adopted ART into their daily dental practice. It was not to assess the impact of ART introduction in a South African public oral health district service over a period of 5 years, as the reviewer has worded it. Perhaps we may have insufficiently clearly expressed the aim, as the reviewer made a suggestion to improve its wording. This difference in understanding of the aim of the study is the cause for a number of suggestions made by the reviewer.

We have excluded the 8 operators as the likelihood that they would resort to using ART after year 1 was very low to non-existing. Much more interesting at this stage was the long-term effect of those that had adopted ART after completing the training course. Based on the results of this study and the one that has reported on the barriers to adoption of ART [ref 20], a new study on the effectiveness of ART introduction can be set-up in a much more sound manner.

We revised the stated aim at the end of the ‘Introduction’ section accordingly and removed statements referring to exclusion of 8 operators who did not adopt ART in the ‘Methods’, ‘Results’ and ‘Discussion’ section.

à 3.

For the same reason as mentioned above, we belief that presenting the results in percentages instead of number of treatments, as suggested, is correct. We can understand that the reviewer wishes to have data on the number of (non) ART restorations at 12 months. But we have resorted to the REX score only, as this is the variable used in the report of the Ministry of Health. We have therefore, added a line regarding this situation in the Discussion.

We changed the 1st paragraph on page 7 of our previous manuscript version
to: “The mean percentage of ART restorations in permanent dentition after 1 year was 24.0% (SE 7.2) and increased to 42.7% (SE 9.2) after 5 years. This increase was statistically significant (p=0.02). The percentage of ART restorations in primary dentition after 1 year was 80.6% (SE 4.9) and 72.6% (SE 8.8) after 5 years.”

Time-effect: Unfortunately, we have to disagree with the reviewer as both the text in Results and figure 2 do not show a time-effect on ART restorations in primary teeth.

à 5.

We have added further information about the South African context explaining the reasons for using ART in the ‘Introduction’.

We have published the reasons why ART was so little used (see ref. 20). We have also added lines on the reasons why very few restorations were performed in a country with a similar health care system like South Africa, Tanzania. At the moment the literature doesn’t contain any other publication on ART introduction in the healthcare system, that is why the present study, despite its shortcomings, is of value.

à6 and 9.

Please see the explanation regarding the study aim under “à2.” We have presented the manuscript for English language check to a professional in English literature. What else can we do? Other comments to the reviewer are contained in the responses under 3 and 5.

B. Reviewer’s report: Navarro MF

Unfortunately it is not possible to calculate the type of restorations since that information was not recorded in the treatment registers. Operators only recorded type of treatment (e.g. ART-, Composite-, Amalgam filling, Extraction) and the tooth number.

We investigated the reason why ART was so little used and have reported it elsewhere (ref 20).

We changed the 1st paragraph on page 7 of our previous manuscript version. See earlier response.