Author's response to reviews

Title: Relationship of psychological and oral health statuses with self-perceived halitosis in a Jordanian population: a cross-sectional study

Authors:

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Author's response to reviews: see over
Dr Jun Aida,
Section Editor,
Epidemiology of oral health
BioMed Central Oral Health,

Dear Dr Aida,

Thank you very much for considering our manuscript entitled “Relationship of psychological and oral health statuses with self-perceived halitosis in a Jordanian population: a cross-sectional study”, for the publication in BioMed Central Oral Health.

We were pleased with the comment of the reviewers and received your latest comments and made modifications to the manuscript accordingly. Please note the point-by-point response below.

We look forward to receiving the final decision soon.

Sincerely,

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Editorial comments:

1- can the authors be consistent in shortening and abbreviating words. Abstract, what does BANA stand for and in the results OLT.
Abstract was corrected, we kept the abbreviated OLT in the result section as we mentioned organoleptic testing (OLT) when it was first mentioned in the article (abstract and the background).

2- Background could have one paragraph on the use of these measures for measuring Halitosis and what has been found with these measures before.
We agree, paragraph was added.

3- Method - please describe how oral exams and periodontal examinations were undertaken. You have included them as an additional file with their definitions (check Spelling) but need the basic information in the methods. Also need to alert the reader to where to find this appendix or table.
Agree, corrected accordingly.

4- Page 8, line 151-152, please reword as does not make sense."
Corrected.

Reviewer: Yusuke Matsuyama

queries:

1- tests you used (OLT, BANA, and SCL-90R) are a little described in method section. I recommend you to make sections to describe them in method.

We included one paragraph to describe BANA test and some other methods to detect halitosis in the background section. We described how to perform the OLT test and explained the SCL-90R in the method section.

2- There is not the result of ANOVA though you used in method section.

We used ANOVA for statistical test for different subgroups mentioned in table 3, there were no statistical differences between the subgroups.

3- In page 9, line 178, “According to the results of this study, individuals who sense halitosis may also have depression or anxiety.” However, your result in table 4 does not show significant association between SCL-90R score and self-perceived halitosis.

Agree, the sentence was corrected to; ”Although the results of this study did not show statistical significance, individuals who sense halitosis which was confirmed by OLT test, may also have depression or anxiety( aOR=1.04 and 1.51 with P value=0.092 and 0.062 respectively).”

4- According to table 4, what do the ORs mean? i.e. when score of somatization 1
point increase, the likelihood of self-perceived population increases 1.06 times? If so, you should describe that the score of SCL-90R was used as continuously variable in method section. In addition, this is just a my idea, I recommend you to divide SCL-90R into two or three categories and compare highest and lowest group.

An odds ratio (OR) is a measure of association between an exposure and an outcome. The OR represents the odds that an outcome will occur given a particular exposure, compared to the odds of the outcome occurring in the absence of that exposure.

- OR=1 Exposure does not affect odds of outcome
- OR>1 Exposure associated with higher odds of outcome
- OR<1 Exposure associated with lower odds of outcome

This is an indication that needs to be evaluated with its p value to check its significance. We think that dividing the SCL-90R will complicate the analysis and will be insufficient to give stronger statistical difference with limited number of participant. This was mentioned as a limitation of the study.

5- In page 10, line 191, “We tried to eliminate this by applying strict exclusion criteria and to avoid recruiting patients from otolaryngology and oral medicine clinics.” I think strict exclusion criteria strengthen internal validity but weaken external validity. Thus, this cannot eliminate selection bias.

Totally agree, and this was clarified in the limitation of the study.

6- In general, tables in articles do not have vertical lines. In addition, they should be understandable only their own.

Tables were corrected