Author’s response to reviews

Title: Salivary characteristics and dental caries experience in remote Indigenous children in Australia: A cross-sectional study.

Authors:

Ratilal Laloo (r.lalloo@uq.edu.au)
Santosh Kumar (santoshkumar.tadakamadla@griffithuni.edu.au)
Jeroen Kroon (j.kroon@griffith.edu.au)
Ohnmar Tut (Ohnmar_tut@hotmail.com)
Sanjeewa Kularatna (sanjeewa.kularatna@qut.edu.au)
Robyn Boase (rmboase@bigpond.net.au)
Kostas Kapellas (kostas.kapellas@adelaide.edu.au)
Donald Gilchist (don@dongilchrist.com.au)
Elizabeth Cobbledick (e.m.cobbledick@gmail.com)
Joel Rogers (joel.rogers@my.jcu.edu.au)
Newell Walter Johnson (n.johnson@griffith.edu.au)

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Editor comments:
Responses:
Thank you for your revised submission. Our reason for sending major revisions a second time is that the reviewers' concerns regarding the manuscript's discussion (and STROBE guidelines) do not appear to have been addressed. If these are not addressed in the next revised submission we may not be able to continue with your manuscript. We have followed STROBE Guidelines and now make that explicit by direct reference to the Guidelines. Compliance with the checklist is attached – by reference to sections of the manuscript (clean version).

For the declaration 'Ethical Approval and Consent to participate' please state explicitly if patients provided informed written consent (or similar) to participate. We obtained written, signed consent from all families included in the study. This is implicit in the ethical approvals. This is stated explicitly
in the current revision.

The declaration 'Consent for publication' refers to participants providing identifiable data (for instance direct quotes or photographs). Data of this kind is not included in your manuscript and so under this declaration please write 'not applicable'

This is now changed to ‘Not applicable’.

Reviewer 1:

Responses:
The authors did not follow the STROBE guidelines that were recommended. The presentation is disorganized. We have followed STROBE Guidelines and now make that explicit by direct reference to the Guidelines. Compliance with the checklist is attached – by reference to sections of the manuscript (clean version).

We believe we have now organised the various components of the MS appropriately.

The discussion and the conclusion are not aligned with the objective of the study. The discussion and conclusion sections have been edited to focus on the objectives of the study and on the data presented. We have deliberately discussed the meaning of the results more broadly in the context of the overall longitudinal study of the cost effectiveness of preventative interventions. These data were collected as baseline to a longitudinal study and, as such, the wider discussion is pertinent.

The authors did not discuss the strengths and limitations of the study.

We have placed an explicit paragraph in the Discussion.

Reviewer 2:

Responses:
The authors have greatly modified and improved the manuscript by adding the necessary details to the Materials and Methods, and performing further analyses on their data. However, the discussion section is still too general. See above comment re justification for the content of the Discussion.

Although the authors have extensively altered the results and methods sections, the discussion still does not "discuss" the results in sufficient depth. The only alterations the authors have apparently made were shortening the third and fourth paragraphs.

These changes do not address the comments made by all three reviewers: Reviewer1 "discussion is interesting but does not discuss the given findings", Reviewer2 "most of the discussion is not pertinent to the results", Reviewer 3 "the discussion is too general... (it should) focus on interpreting the results". The authors should re-write their discussion focusing on interpreting their results.

The main findings from the results are similar to those described in other populations, and have been expanded, particularly in relation to diet, microbial changes and, speculatively, as an unlikely result of health promotion.

Perhaps the similarity of our findings to those published from other populations makes them less “exciting”, but they are nevertheless important as such data have never, as far we can ascertain, been described for a remote Indigenous community in Australia or elsewhere.
We emphasise their value as baseline for our longitudinal study.

We believe that the general aspects of the Discussion are important for the purpose of the study – seeking cost-effective methods for disease prevention in a remote community.