Author’s response to reviews

Title: Oral Health Related Quality of Life of Patients with Class III Skeletal Malocclusion Before and After Orthognathic Surgery

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Version: 3 Date: 10 Nov 2019

Author’s response to reviews:

Dear Editor in Chief

Thank you very much for the precise review. Please find our response to reviewer’s comment as follows:

The manuscript has substantially improved.

ADDITIONAL REQUESTS/SUGGESTIONS:
I would like to thank the authors for their constructive response to my comments. I have only one comment. This is more a suggestion to make the manuscript more relevant than a critique.

The Minimal Important Difference (MID) is a concept. This difference is assumed to be relatively constant for a questionnaire. Therefore, published work about an MID by other authors can be used to judge the achieved results in this study as to whether OHIP change scores exceed the MID or not. If the OHIP difference (follow-up minus baseline) is larger than the MID, it is assumed that the intervention is clinically meaningful. Because the OHIP change was larger than the 2 MIDs that I mentioned before in the previous suggestions, the authors could call their findings clinically relevant even if they have not determined the MID in their study.

A study that can demonstrate an intervention's effect as clinically relevant and statistically significant is much more valuable than a study that found an intervention's effect to be only statistically significant. Even a trivial effect can be statistically significant if the sample size is large enough. However, patients and clinicians alike want to have a meaningful OHRQoL change. It seems the studied intervention provides these meaningful effects and the reader needs to be informed accordingly.

Response: Thank you very much for your interest in our paper and your valuable comments. We truly appreciate the time and effort you put into this paper to improve its quality.
According to your comment, we used published work by other authors to further interpret our findings and discuss their clinical relevance.

The following line was added to the end of Results section (Line 217, Page 10):
The OHIP difference (follow-up minus baseline) in this study was 9.16.

Part of the Discussion section was also modified as follows (Lines 287-294, Page 13):
Locker et al, [23] and Reissmann et al. [24] interpreted the change in OHIP scores in relationship to the minimal important difference (MID). In this study, we mainly focused on statistical significance of the findings and did not calculate the MID, which was a limitation of our study. However, the OHIP difference (follow-up minus baseline) in our study was found to be 9.16. The MID reported by Reissmann et al. [24] was 2. Since the OHIP difference in our study was larger than the MID reported by Reissmann et al, [24] it may be concluded that the intervention had a clinically meaningful effect on OHRQoL of patients.

Absence of a control group was another limitation of this study.

Thank you again for your time and consideration
The corresponding author