Author’s response to reviews

Title: Minimizing risk of customized titanium mesh exposures – a retrospective analysis

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Author’s response to reviews:

Submission of manuscript

`Minimizing risk of customized titanium mesh exposures – a retrospective analysis`

Dear Prof. Mijiritsky,

On behalf of my coauthors, thank you again for considering our research article ‘Minimizing risk of customized titanium mesh exposures – a retrospective analysis’ for publication in your journal BMC oral health pending satisfactory revision in response to reviewer’s comments. The manuscript has been revised to address the reviewer’s and your comments, and a detailed point-by-point response to each reviewer/editorial point is attached. A clean version of our manuscript is attached. We believe these changes have improved the manuscript, and reviewer’s comments are greatly appreciated.

Yours sincerely,

Dr. Amely Hartmann

Dear Editor/Reviewer,

Thank you for critically assessing our manuscript for publication in BMC oral health.

We wish to thank you for suggested improvements.
Editor

Technical Comments:
move declarations section before references
Missing: Acknowledgement
Missing: Abbreviations
MS body: rename 'INTRODUCTION' to 'Background'
MS body: rename 'LITERATURE' to 'References'
rename 'FIGURES' to 'Figure Legends'

We changed the manuscript according to these suggestions.

Reviewer 2 (Nihat Akbulut):

Dear editör; The authors of this paper have revised it to ours advise and I satisfied. You know the previous revisions made too times by authors according to me and especially Rewiever 3's.
So, it is acceptable for me and the last decision is of course yours.

Best regard…. 

Response:

We thank the reviewer 2.

Reviewer 3 (Ausra Ramanauskaite)

Reviewer 3 - Suggestion 1:

Primary outcome: to describe the population concerning the grafting success - please, modify it into: primary outcome was the grafting success defined as…

Response:

We corrected this according to reviewer´s suggestion.
Primary outcome was the grafting success defined as the feasibility of implant placement in the planned position and achievement of an adequate primary stability (15Ncm-35Ncm) until the re-entry and to finalize with the individual prosthetic supraconstruction.

Reviewer 3 – Suggestion2:

When was the last follow-up. Until the mesh was removed? i.e., patients were controlled each month for 4 to 8 months depending on the defect? Make it clear.

Response:

We apologize for this inaccuracy and specified the information.

Outcomes were also assessed one week after surgery and during follow-up each month. In summary, patients were controlled each month for 4 to 8 months depending on the defect. The Re-opening and removal of the titanium mesh was after approximately 4-8 months depending on size of the defect.