Brazilian Dental Science

Subject: [BDS] Editor Decision

Dear Paula Roberta Pires Miranda, Júlio Ferraz CAMPOS, Samir de Moura Gonçalves Leite, Nathalia de Carvalho Ramos Ribeiro, Robson Roberto da Silva, Renato Sussumu NISHIOKA:

Your submission Computer assisted zygomatic implants in atrophic maxilla:: a clinical report to Brazilian Dental Science, has been revised and according to reviewers' comments, there are questions to be addressed and/or points to be clarified/corrected.
Please answer the reviewers considerations point-by-point in a separate document and also please make all the corrections in the text highlighted in yellow.

Deadline: 30 days

Thank you for considering Brazilian Dental Science for publishing your research.
We are looking forward the revised version of you manuscript.

Sincerely,

Reviewer B:
Recommendation: Revisions Required

Questionnaire

Does the manuscript contain new and significant information to justify publication?*

Yes

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Does the Abstract (Summary) clearly and accurately describe the content of the article?

Yes

Is the problem significant and concisely stated?

Yes

Are the methods or research design described comprehensively? Is the statistical analysis adequate?

Not Applicable

Are the interpretations and conclusions justified by the results?

Yes

Is adequate reference made to other work in the field?

Yes

Is the language acceptable?

Yes

Manuscript Structure

Length of article is:*

Adequate

Number of tables is:

Adequate

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Number of figures is:

Adequate

Please state any conflict(s) of interest that you have in relation to the review of this paper (state "none" if this is not applicable).

not applicable

Rating

Interest*

Good

Quality

Excellet

Originality

Good

Overall

Good

Comments to the Author

In the abstract and summary, replace "patience" with "patient". Also, revise the term "local sedation"; the more common technical term would be "local anesthesia with or without conscious sedation".
It would be interesting to mention the specific planning software used, to increase the reproducibility of the method by other professionals.
In the abstract, the phrase "patient had no complaints" could be written in a more academic way as "no complications or adverse events were reported by the patient".

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Reviewer C:
Recommendation: Resubmit for Review

Questionnaire

Does the manuscript contain new and significant information to justify publication?*

Yes

Does the Abstract (Summary) clearly and accurately describe the content of the article?

Yes

Is the problem significant and concisely stated?

Yes

Are the methods or research design described comprehensively? Is the statistical analysis adequate?

Not Applicable

Are the interpretations and conclusions justified by the results?

Yes

Is adequate reference made to other work in the field?

No

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Is the language acceptable?

Yes

Manuscript Structure

Length of article is:*

Adequate

Number of tables is:

Adequate

Number of figures is:

Too Long

Please state any conflict(s) of interest that you have in relation to the review of this paper (state "none" if this is not applicable).

None.

Rating

Interest*

Excellent

Quality

Good

Originality

Average

Overall

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Good

Comments

Comments to the Author

The manuscript addresses a clinically relevant topic and presents a well-documented case of computer-assisted zygomatic implant rehabilitation in an atrophic maxilla. The case is adequately followed up, and ethical approval and patient consent were appropriately obtained.
However, the manuscript requires major revision before it can be considered for publication.
MAJOR REVISION:
1- The primary concern relates to the quality of the English language, there are frequent grammatical errors, incorrect word choices, and inconsistencies in terminology throughout the text, also it would be recommendable to check the translated terms such as "coagulogram" preffering "coagulation profile test". A thorough professional language revision is strongly recommended.

2- Initiate figure's subtitles with capital letters.
3- In the abstract section, mention the digital software used in the study, also favor mentioning STL as files, not archives reporting it in capital letters just as DICOM files.
4- Mention the Ethics Committee approval in the beggining of methods section.
Additionally, the abstract should be revised to improve conciseness and structure. Excessive technical details regarding file formats and printing procedures should be reduced, while greater emphasis should be placed on the clinical relevance and outcomes of the case.
5- Figure 9 seems out of focus.
6-The discussion section appropriately reviews the literature; however, it remains largely descriptive. The authors are encouraged to strengthen the critical discussion by addressing also the limitations of the technique, potential risks associated with zygomatic implants, and the inherent limitations of reporting a single clinical case.

With these revisions, the manuscript has the potential to make a valuable

contribution to the literature on digital workflows and zygomatic implant rehabilitation.

Reviewer D:
Recommendation: Revisions Required

Questionnaire

Does the manuscript contain new and significant information to justify publication?*

No

Does the Abstract (Summary) clearly and accurately describe the content of the article?

Yes

Is the problem significant and concisely stated?

No

Are the methods or research design described comprehensively? Is the statistical analysis adequate?

Not Applicable

Are the interpretations and conclusions justified by the results?

No

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Is adequate reference made to other work in the field?

Yes

Is the language acceptable?

Yes

Manuscript Structure

Length of article is:*

Too Short

Number of tables is:

Adequate

Number of figures is:

Adequate

Please state any conflict(s) of interest that you have in relation to the review of this paper (state "none" if this is not applicable).

None

Rating

Interest*

Average

Quality

Average

Originality

Brazilian Dental Science

Average

Overall

Average

Comments

Comments to the Author

This is a very interesting and clinically relevant case. The manuscript has merit, especially because of the digital workflow. However, substantial revisions are needed to improve structure, scientific depth, reporting clarity, and compliance with journal standards.
Major comments
Introductio
Lines 51-65: This section is repetitive and needs better organization. It first states that alternative techniques reduce/avoid grafting, then repeats in detail the limitations of graft-based rehabilitation. Please consolidate graft-related challenges in one concise paragraph, then add a separate paragraph introducing the digital technologies used in this case CBCT, intraoral scanning, and computer-assisted planning.
Please rewrite the final paragraph of the Introduction to clearly state the aim of this case report and use consistent terminology for the surgical and digital workflow.
Case Report
1. Please define all abbreviations at first mention (eg, DICOM, STL, CBCT). Use “DICOM” and “STL” in the text.
2. Please standardize figure legends according to the journal format (“Figure 1 -”) and apply this format consistently throughout the manuscript.
3. Please reorganize figure sequence for logical and chronological flow, and consider multipanel figures. Suggested grouping: Figures 1 and 2 together; Figures 4 and 5 together; Figures 6 to 8 together. Figure 10 should be presented before Figure 9.
4. The 12-month assessment is under-documented. Please include objective follow-up documentation beyond a smile photo, with intraoral views that allow evaluation of peri-implant soft tissues, prosthesis contour
5.Please explicitly report whether any postoperative complications occurred and

how they were managed.

Discussion

1. Please start the Discussion by summarizing the main findings of this case and explaining how digital planning contributed to treatment predictability in a severely atrophic maxilla.

2. The role of digital tools is underdeveloped. Since CBCT, STL/DICOM integration, and guided planning were central to this report, discuss how technological evolution improved surgical accuracy and workflow reliability compared with earlier approaches.

3. Please strengthen the evidence-based discussion on long-term outcomes of zygomatic implants, including survival/success rates and biological/technical complications.

5. The prosthetic discussion is currently superficial. Please expand prosthetic rationale and outcomes.

6. Please include a dedicated limitations paragraph.

References

Please revise and standardize all references according to the journal guidelines (Vancouver style). Many references appear to be formatted in ABNT style and do not comply with the required format.

Conclusion

With only 12 months of follow-up, long-term safety/predictability should be stated more cautiously. Please make the conclusion more pragmatic and aligned with the presented follow-up period, while emphasizing the contribution of the digital workflow.

Minor comments

Title

Line 1: Please replace “clinical report” with “case report” and use this term consistently throughout the manuscript.

Keywords

Please revise keywords using official MeSH descriptors.

Introduction citations

Please add references for:

Lines 43-45: Statement on complexity/limitations of implant-supported rehabilitation in atrophic jaws due to insufficient bone height/thickness.

Lines 45-47: Statement that GBR and sinus floor elevation with grafting are among the most used reconstructive techniques before implant placement.

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Reporting and language

Although ethics committee approval is reported, please clearly state at the beginning of the case report:

1. The manuscript follows CARE guidelines/checklist
2. The patient provided written informed consent for treatment and publication of clinical information/images.

Please revise the manuscript for English quality and technical terminology “cone beam,” “patient,” “file,” “conventional implants”.

Please check consistency between figure callouts in the text and actual figure numbering.

Please present 12-month outcomes more clearly and objectively.
