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#### **REVIEWER'S REPORT**

Manuscript No.: IJAR-51815

Date: 22/05/2025

Title: "Efficacy of Transcutaneous Electrical Nerve Stimulation and Soft Splint Therapy in the Treatment of Patients with Temporomandibular Joint Disc Displacement with Reduction – A Comparative Study"

Recommendation:	Rating	Excel.	Good	Fair	Poor
Accept as it is Accept after minor revisionYES Accept after major revision Do not accept ( <i>Reasons below</i> )	Originality		~		
	Techn. Quality			~	
	Clarity		~		
	Significance		~		

Reviewer Name: Dr.GUNARATHNA.K (PT)

Date: 22/05/2025

#### **Reviewer's Comment for Publication.**

The manuscript titled "Efficacy of Transcutaneous Electrical Nerve Stimulation and Soft Splint Therapy in the Treatment of Patients with Temporomandibular Joint Disc Displacement with Reduction -A Comparative Study" presents a well-structured, randomized controlled trial evaluating two non-invasive treatment modalities for temporomandibular joint disc displacement with reduction (DDWR).

The authors have successfully addressed a clinically relevant question by comparing Transcutaneous Electrical Nerve Stimulation (TENS) and soft splint therapy. The study is commendable for its clear objective, robust methodology, appropriate use of statistical analysis, and thorough discussion with supporting references. The use of double-blinding adds further strength to the study design and minimizes potential bias.

The findings demonstrate that TENS therapy significantly outperforms splint therapy over a fourweek period in reducing pain intensity and masticatory muscle tenderness while improving mouth opening. These results align with existing literature and contribute to the growing evidence supporting TENS as an effective first-line intervention in managing DDWR.

However, the study's limitations, including a relatively short observation period and small sample size, are rightly acknowledged. Future studies with longer follow-up durations and larger cohorts are recommended to assess the long-term benefits and comparative effectiveness of these interventions.

Overall, the manuscript provides valuable insights for clinicians and researchers in the field of temporomandibular disorders and supports the integration of TENS therapy into standard conservative management protocols for DDWR.

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Recommendation: Accept with minor revisions

# **Detailed Reviewer's Report**

#### 1. Short Duration (4 weeks):

The major limitation is the short follow-up. TMD, especially DDWR, often requires long-term management, and the benefits of splint therapy might become more evident over a longer period.

## 2. Small Sample Size (n=40):

The limited number of participants affects the statistical power and generalizability of the findings. Larger trials would be needed to confirm these results.

## 3. Lack of Imaging for Diagnosis:

Diagnosis was made solely based on clinical criteria without MRI or ultrasound, which are considered standard for confirming disc displacement. This raises concerns about diagnostic accuracy.

## 4. No Placebo or Control Group:

A third group receiving no active intervention (placebo or standard care) would have helped to rule out regression to the mean or placebo effects.

5. Exclusion of Analgesic Users from Analysis:

Excluding participants who needed additional pain medication introduces attrition bias and potentially underrepresents more severe cases.

## 6. Over-reliance on TENS Results:

While TENS showed statistically significant results, its clinical superiority should be interpreted cautiously given the short duration, lack of follow-up, and absence of standardization in patient activity and compliance.