

REVIEWER'S REPORT

Manuscript No.: IJAR-52128

Date: 07/06/2025

Title: Pinhole Surgical Technique Versus Vestibular Incision Subperiosteal Tunnel Access Technique in Conjunction with Collagen Membrane in the Treatment of Cairo Type 1 Isolated Gingival Recession Defects

Recommendation:

Accept as it is

Accept after minor revision.....

Accept after major revisionYes.....

Do not accept (*Reasons below*)

Rating	Excel.	Good	Fair	Poor
Originality	•			
Techn. Quality		•		
Clarity		•		
Significance		•		

Reviewer Name: Dr. Sireesha Kuruganti

Date: 07/06/2025

Reviewer's Comment for Publication.

(To be published with the manuscript in the journal)

The reviewer is requested to provide a brief comment (3-4 lines) highlighting the significance, strengths, or key insights of the manuscript. This comment will be Displayed in the journal publication alongside with the reviewers name.

This is a well-structured and valuable clinical study comparing two minimally invasive techniques, VISTA and PST, for the treatment of Cairo Type 1 gingival recession. The manuscript is clearly written, the methodology is generally sound, and the topic is of significant interest to clinicians in periodontology.

Detailed Reviewer's Report

Manuscript Review Report

Manuscript Title: Pinhole Surgical Technique Versus Vestibular Incision Subperiosteal Tunnel Access Technique in Conjunction with Collagen Membrane in the Treatment of Cairo Type 1 Isolated Gingival Recession Defects

The introduction provides a strong rationale for the study, and the discussion compares the findings with existing literature effectively.

However, there are a few major and minor points that need to be addressed to improve the manuscript's clarity, accuracy, and overall impact.

Major Points for Revision

International Journal of Advanced Research

Publisher's Name: Jana Publication and Research LLP

www.journalijar.com

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* **Contradictory Findings on Gingival Thickness (GT):** There is a significant contradiction between the results presented in the main text/tables and the statements made in the abstract and conclusion.

* **Results Section (Line 185):** The text states, "...there was a non-significant increase in mean gingival thickness in VISTA and PST groups at 3 and 6 months."

* **Table 5 (Page 11):** The data clearly supports this, showing the comparison between baseline and follow-up periods as non-significant ($p_1=NS$, $p_2=NS$).

* **Abstract (Line 46-47):** The abstract claims, "...statistically significant improvements from baseline in... increase in gingival thickness."

* **Conclusion (Line 134):** This claim is repeated: "Both groups recorded statistically significant improvements from baseline in... increase in gingival thickness."

Recommendation: This is a critical error that must be corrected. The authors must revise the Abstract (Line 47) and Conclusion (Line 134) to accurately reflect the non-significant findings for Gingival Thickness as reported in the Results section and Table 5. The Discussion section (Lines 268-278) should also be rewritten to discuss why the increase in GT was not statistically significant, rather than explaining it as if it were a positive finding.

* **Methodological Clarity on PST Suturing:** The description of the Pinhole Surgical Technique (PST) procedure lacks clarity regarding the use of sutures, which may cause confusion as the technique is often promoted as being "suture-free" for flap stabilization.

* **Line 144:** States a collagen membrane was placed through the pinhole.

* **Line 148:** States, "Collagen membrane was sutured with the flap using 5.0 polypropylene suture..."

Recommendation: The authors should provide a more detailed explanation of this step. Was the pinhole incision itself sutured closed? Or was the membrane sutured to the mobilized flap internally within the tunnel? Clarifying this is essential for the reproducibility of the study's methodology.

Minor Points and Specific Comments

* **Title (Line 1):** The title is clear and accurately reflects the study's content.

* **Introduction:**

* **Line 54:** Typographical error. "Marginal tissue ssue recession" should be corrected to "Marginal tissue recession".

* The introduction effectively establishes the background and rationale for the study. The justification for using a collagen membrane is well-argued.

* **Subjects and Methods:**

* **Line 115:** It is good practice that specific inclusion criteria like recession depth $\geq 3\text{mm}$ are mentioned.

* **Line 123:** Typographical error. "visual analogue sca scale" should be corrected to "visual analogue scale".

* **Line 139:** The reference number for the PST group is missing. It should be "Group II: PST group (9):".

* **Results:**

* **General Phrasing:** The phrase "as regard" or "as regard to" is used multiple times (e.g., Lines 166, 171, 175). It would be more grammatically correct to use "regarding" or "with regard to".

* **Table 2 (CAL) & Table 3 (RD):** A minor relapse or worsening in mean CAL and RD is noted between the 3-month and 6-month follow-ups (e.g., CAL in VISTA group increases from 0.75 mm to 0.90 mm). Although this change is not statistically significant ($p_3>0.05$), a brief comment on this trend in the Discussion section could add value.

* **Table 2 & 3 (Pages 10-11):** There appears to be a typographical error in the tables. The symbol for plus/minus (\pm) has been incorrectly transcribed as a plus sign (+) for the 6-month data points (e.g., "0.90+0.83"). This should be corrected to " \pm " to denote the standard deviation.

* **Table 6 (VAS):** The results text (Lines 75-78) focuses on the comparison between the groups. For completeness, it would be beneficial to also explicitly state the significant intra-group findings in the text

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(i.e., that pain scores significantly decreased from 24h onwards in both groups, as indicated by the p-values in the table).

*** Discussion:**

* Line 228: The reported improvements in CAL and recession depth are well-discussed and logically attributed to the coronal advancement and stabilization.

* Lines 244-255: The discussion on the lack of change in Keratinized Tissue Width (KTW) is excellent. It correctly identifies that these techniques reposition rather than create new keratinized tissue and rightly contrasts this with findings from other studies.

* Lines 294-305: The discussion on minimal postoperative complications is a strong point and is well-supported by literature, highlighting a key advantage of these techniques.

*** Conclusion:**

* Aside from the major point about GT mentioned above, the conclusion is concise and well-supported by the study's findings, emphasizing the clinical success of both techniques and the benefits of using a collagen membrane.

*** Limitations and Recommendations:**

* Lines 136-138: The authors provide a candid and appropriate assessment of the study's limitations and offer sound recommendations for future research.

Overall Recommendation

Accept with Major Revisions.

This is a clinically relevant study with the potential to contribute significantly to the literature. The primary concerns are the major contradiction in the reporting of gingival thickness outcomes and the need for methodological clarification. Once these points, along with the minor suggestions, have been thoroughly addressed, the manuscript will be suitable for publication.