

## REVIEWER'S REPORT

Manuscript No.: IJAR-52218

Date: 13/06/2025

**Title:** TREATMENT OF A SINGLE GINGIVAL RECESSON USING CORONALLY ADVANCED FLAP WITH CONNECTIVE TISSUE GRAFT IN A TOOTH WITH SEVERE INTERNAL ROOT RESORPTION: A CASE REPORT

### Recommendation:

Accept as it is .....Yes.....

Accept after minor revision.....

Accept after major revision .....

Do not accept (*Reasons below*) .....

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

Reviewer Name: Dr. Sireesha Kuruganti

**Date:** 13/06/2025

### 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 case report that details the successful multidisciplinary management of a complex clinical scenario. The combination of severe internal root resorption with a significant gingival recession defect presents a unique challenge, and this report clearly outlines a predictable treatment approach. The manuscript is logically organized, the procedures are described in sufficient detail, and the discussion effectively contextualizes the case within the existing literature.

### *Detailed Reviewer's Report*

Review of Manuscript: "TREATMENT OF A SINGLE GINGIVAL RECESSON USING CORONALLY ADVANCED FLAP WITH CONNECTIVE TISSUE GRAFT IN A TOOTH WITH SEVERE INTERNAL ROOT RESORPTION: A CASE REPORT"

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Below are specific comments and suggestions for improvement, referenced by line number as they appear in the document.

# International Journal of Advanced Research

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## REVIEWER'S REPORT

### Major Comments

The primary strengths of this manuscript are:

- \* **Clinical Significance:** It addresses a complex and uncommon clinical problem, providing a successful treatment protocol that combines endodontic and periodontal therapies.

- \* **Detailed Methodology:** The surgical and endodontic procedures are described with enough clarity to be understood and potentially replicated.

- \* **Strong Documentation:** The case is well-documented with high-quality pre-operative, intra-operative, and post-operative images, including clinical photos, periapical radiographs, and CBCT scans.

The manuscript could be further strengthened by addressing minor issues related to typography and by adding slightly more detail to the results.

### Specific Comments by Section and Line Number

#### Title

- \* Lines 3-6: The title is descriptive and accurately reflects the content of the case report. While it is long, this is often acceptable for case reports to ensure specificity. No change is required.

#### Keywords

- \* Line 15: There is a typographical error. "Mineral trioxide aggregate" should be corrected to "Mineral trioxide aggregate".

#### Abstract

- \* Lines 17-23: The abstract is concise and provides an excellent summary of the case, including the problem, the intervention, and the outcome. It effectively captures the reader's interest.

#### Introduction

- \* Lines 25-41: The introduction provides a solid background on gingival recession and the rationale for using a Coronally Advanced Flap (CAF) with a Connective Tissue Graft (CTG). It successfully establishes the complexity added by the internal root resorption, setting the stage for the case presentation.

#### Case Report

- \* Line 44: "tooth #24" - Excellent use of the Universal Numbering System for clarity.

- \* Lines 43-46: The initial clinical findings are specific and detailed (7 mm recession, 10 mm CAL, thin biotype), which is crucial for understanding the initial challenge.

- \* Line 52: The diagnosis is clear and accurate.

#### Treatment Plan & Procedure

- \* Line 36: There is a character error. "MTA" should be corrected to "MTA" (using the standard Latin letter 'M' instead of the Greek letter 'Mu').

- \* Line 55: The typographical error is repeated. "Mineral Trioxide Aggregate" should be corrected to "Mineral Trioxide Aggregate".

- \* Lines 59-65: The description of the trapezoidal split-full-split thickness flap is very well-written and detailed. This level of technical description adds significant value to the report for other clinicians.

- \* Lines 72-74: The description of harvesting the Free Gingival Graft (FGG) and preparing it into a CTG is also clear and detailed.

#### Results / Follow-up

- \* Line 23 & 137: The abstract and discussion mention a 6-month follow-up with "maximum root coverage" and "full root coverage". However, the main body of the report shows images and mentions follow-ups at 1 and 3 months.

- \* **Suggestion:** It would strengthen the report to include a final paragraph in the "Case Report" or a dedicated "Results" section that explicitly states the quantitative findings at the final 6-month follow-up. For example: "At the 6-month follow-up, 100% root coverage was achieved, with a probing depth of 2 mm and a CAL gain of 8 mm. The keratinized tissue width increased from X mm to Y mm." This would provide a more robust conclusion.

- \* Figures 9 & 10: The follow-up images clearly demonstrate excellent aesthetic results and tissue health.

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## **REVIEWER'S REPORT**

### Discussion

\* Lines 111-118: The discussion starts appropriately by framing the treatment within the context of established, predictable procedures for Miller Class I and II recessions.

\* Lines 124-129: The authors do an excellent job of highlighting the core challenge of this case—the severe internal root resorption—and explaining its etiology.

\* Line 132: The mention of sealing the resorptive defect with MTA is critical, and its properties are well-supported by the provided reference.

\* Lines 135-140: This section provides a superb synthesis of the factors contributing to the successful outcome: endodontic stability, enhanced tissue biotype from the CTG, and meticulous surgical technique.

\* Lines 145-151: The emphasis on a multidisciplinary approach is a key takeaway and is well-articulated, elevating the manuscript from a simple case description to a lesson in comprehensive patient care.

### Conclusion

\* Lines 152-157: The conclusion is direct, well-supported by the evidence presented, and accurately summarizes the clinical implications of the case.

### References

\* The references are appropriate, relevant, and include foundational papers as well as more recent literature.

### Final Recommendation

This manuscript is recommended for publication with minor revisions.

The case is of high clinical interest and is presented with commendable clarity and documentation. Addressing the minor typographical errors and adding specific quantitative results from the 6-month follow-up will enhance the scientific rigor and overall quality of this excellent report.