

## REVIEWER'S REPORT

Manuscript No.: IJAR-54045

Date: 26/09/2025

**Title: Expanding envelop of discrepancy**

### Recommendation:

Accept as it is .....

**Accept after minor revision.....Yes.....**

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:** 26/09/2025

### 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 manuscript explores the timing of orthodontic treatment across skeletal dimensions—transverse, sagittal, and vertical—emphasizing the evolving role of skeletal anchorage and functional appliances. It is conceptually rich and clinically relevant.

## Detailed Reviewer's Report

Manuscript Review: "Expanding Envelope of Discrepancy"

### General Overview

This manuscript explores the timing of orthodontic treatment across skeletal dimensions—transverse, sagittal, and vertical—emphasizing the evolving role of skeletal anchorage and functional appliances. It is conceptually rich and clinically relevant, but would benefit from structural tightening, clearer transitions, and more robust referencing.

### Section-wise Review with Line References

33–84: Introduction

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### - Strengths:

- Lines 33–47: Effectively sets the stage by framing the timing debate in orthodontics.
- Lines 48–66: Cites landmark studies (Tulloch, Proffit, Gianelly) to support the shift from early to adolescent-phase treatment.

### - Suggestions:

- Line 67: “Exceptions however...” needs clearer phrasing—consider rewording for readability.
- Lines 70–75: The claim that skeletal anchorage can extend the treatment window is compelling but needs stronger citation support.

### 76–84: Growth Indicators

#### - Strengths:

- Line 76–80: Good listing of skeletal maturity indicators (Hand-Wrist, CVM, MP3, Canine calcification).

#### - Suggestions:

- Line 77: “Hand and Wrist radiographsa9” has a formatting error—correct superscript citation.
- Line 79: Consider briefly explaining why dental indicators are gaining popularity.

### 85–134: Transverse Discrepancies

#### - Strengths:

- Lines 88–91: Clearly explains the early closure of transverse growth window.
- Lines 99–101: MARPE is well introduced as a time-extending modality.

#### - Suggestions:

- Line 97: “Very difficult to treat...” could be softened; consider “challenging to treat.”
- Lines 102–134: The transition to Class III discussion feels abrupt—suggest adding a subheading or clearer transition.

### 135–169: Class II Malocclusions

#### - Strengths:

- Lines 135–144: Fixed functional appliances are well described with rationale.
- Lines 145–154: Skeletal anchorage benefits are clearly stated.

#### - Suggestions:

- Line 147: “Most studies show no lower incisor proclination...”—cite specific studies for this claim.
- Line 155–169: The section on distalization could benefit from a diagram or clinical example.

### 170–203: Class III Malocclusions

#### - Strengths:

- Lines 170–183: BAMP and TAD-based approaches are well articulated.
- Lines 184–195: Dual-component correction strategy is innovative and clinically valuable.

#### - Suggestions:

- Line 192: “250 gms each side”—consider specifying duration and frequency of elastic wear.
- Line 198: “Burnout of the patients”—rephrase to “treatment fatigue” for professional tone.

### 204–208: Vertical Discrepancies

#### - Strengths:

- Lines 204–207: TADs for posterior intrusion and mandibular autorotation are well explained.

#### - Suggestions:

- Line 206: “Desirable skeletal effects comparable to orthognathic surgery”—needs citation.
- Line 208: Consider summarizing the two schools of thought more clearly.

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209–225: Conclusion

- Strengths:
  - Lines 213–221: Summarizes timing recommendations across dimensions effectively.
  - Lines 222–225: Emphasizes the role of TADs and fixed appliances in extending treatment windows.
- Suggestions:
  - Line 214: “Wait for the right time...”—consider specifying how clinicians can identify this “right time” more precisely.

226–288: References

- Strengths:
  - Includes key studies from Tulloch, Proffit, Gianelly, Pancherz, Ruf, and McNamara.
- Suggestions:
  - Line 227–230: Ensure consistent formatting (e.g., journal names, volume, issue).
  - Line 277–288: Some references are repeated (e.g., CVM method)—consider consolidating.

Final Recommendations

- Add subheadings for each skeletal dimension to improve readability.
- Include diagrams or clinical case examples to illustrate appliance effects.
- Strengthen citations where claims are made about treatment efficacy or timing.
- Proofread for formatting errors (e.g., superscripts, spacing, grammar).