

## Review of: "Bisphosphonate-Related Osteonecrosis of the Jaws Treated with Platelet-Rich Plasma: Preliminary Results from a Case Series"

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Potential competing interests: No potential competing interests to declare.

**Title:** Bisphosphonate-Related Osteonecrosis of the Jaws Treated with Platelet-Rich Plasma: Preliminary Results from a Case Series

In the article, it is discussed how platelet-rich plasma (PRP) preparations might be used to treat the condition known as bisphosphonate-related osteonecrosis of the jaw (BRONJ), which is brought on using bisphosphonate medications (BPs). A summary of the piece is given below:

## Strengths:

- 1. Clinical Relevance: The paper tackles a significant and pertinent clinical topic. Healthcare practitioners are very interested in any prospective treatment possibilities for BRONJ since it is a difficult illness to manage.
- 2. Detailed Methodology: The research methodology, including patient selection, PRP preparation, surgical procedures, and post-operative care, is thoroughly described in the publication. For academics and healthcare professionals wishing to duplicate the treatment strategy, this degree of specificity is crucial. Long-Term Follow-Up: The study includes a relatively long-term follow-up period (48-50 months), which allows for a more comprehensive evaluation of the treatment's success and its potential long-term effects.
- 3. Success Rate: A noteworthy discovery is the reported 100.0% success rate in treating BRONJ patients with PRP preparation. It implies that using this strategy may help BRONJ patients recuperate.

## Areas of Improvement:

- 1. Sample Size and Generalizability: The paper is deficient in details about the estimation of sample size and potential bias in selection. To make inferences regarding the effectiveness of a treatment, it's critical to understand if the sample size is statistically significant. Furthermore, the research could not be typical of all BRONJ patients, which would restrict the generalizability of the findings.
- 2. Control Group: A comparison with a control group that receives normal care, or a placebo therapy is necessary to determine the PRP treatment's genuine efficacy. It is difficult to ascertain the precise contribution of the PRP preparation to the observed results because this paper does not disclose the existence of a control group.
- 3. Conflict of Interest Disclosure: The article does not mention any potential conflicts of interest among the authors. It's



important to disclose any financial or personal interests that could influence the study's outcomes.

- 4. Citations and References: The article's references and citations are improperly formatted. Citations for prior studies and current, pertinent research on the subject are essential to back up the assertions made in the article.
- 5. Description of limits: A more complete description of the article's limits would be beneficial. This involves looking at potential bias-causing factors, such as the use of a small sample size and the absence of a control group.
- 6. Images: Attach a clinical picture at each post-operative recall visit.
- 7. Concluding Remarks and Relevance: The ramifications of the study's results for clinical practice may be covered in more detail in the article. What larger effects may a therapy method with a 100% success rate have?

## **Summary:**

In conclusion, while the research offers a unique PRP preparation-based therapy strategy for BRONJ, there are areas where it might be improved, especially in terms of study design, sample size, control groups, and the presentation of restrictions and consequences. To confirm the efficacy of this method in a larger patient population, more study and larger-scale clinical studies are required.