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Peer Review

Review of: "Evaluation of Ozonized Fibrin-Rich Plasma as a Therapy for Facial Rejuvenation: A Clinical Case Study"

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Title:

The current title refers to a single case, whereas the manuscript actually describes a **case series**. It is recommended to revise the title to:

"Evaluation of Ozonized Fibrin-Rich Plasma as a Therapy for Facial Rejuvenation: A Case Series with Follow-Up."

Abstract:

The abstract should clearly mention the **duration and method of follow-up** to improve clarity and transparency.

The abbreviation used—**ozonized fibrin-rich plasma (I-PRF)**—is incorrect. The correct terminology is: **ozonized injectable fibrin-rich plasma (O-I-PRF).**

Introduction:

Fibrin-Rich Plasma should not be abbreviated as **I-PRF**; this is misleading and should be corrected throughout the manuscript.

The manuscript does not appear to fill a **clear scientific gap**. Similar topics have already been addressed in previous studies. For example:

https://pmc.ncbi.nlm.nih.gov/articles/PMC11219273/

doi.org/10.32388/KFD20O

Materials and Methods:

Case reports related to dermatological care should follow established reporting guidelines, such as the **CARE guidelines**.

The inclusion and exclusion criteria are **very limited** and require further elaboration for reproducibility and scientific rigor.

The manuscript should include **complete technical details** regarding centrifugation protocols—such as tube angulation, RCF values, and centrifuge settings—as per recommendations in this article: https://doi.org/10.1002/JPER.18-0553

A discussion should be included regarding the **type of tubes used for PRF preparation**. It is well-established that certain tubes, particularly those containing clot activators (e.g., silica or silicone), may induce **cytotoxic effects or apoptosis**. For reference:
"A technical note on contamination from PRF tubes containing silica and silicone." BMC Oral Health 21.1 (2021): 1–11.

Clinical Follow-up and Outcome Evaluation:

The manuscript lacks details about the **clinical follow-up protocol**—including the evaluation method, criteria used, and who performed the assessments.

The **results section is very limited**. There is no mention of potential side effects or adverse reactions experienced by the patients.

The **follow-up duration is too short** to draw any reliable conclusions about long-term efficacy or safety.

Discussion:

Some sentences in the discussion section would be more appropriate in the **introduction**, as they provide background rather than interpretation of results.

The **ambiguous outcome evaluation methods** weaken the strength of the conclusions. The discussion should better align with the clarity and limitations of the data presented.

Declarations

Potential competing interests: No potential competing interests to declare.