Journal Name: British Journal of Medicine and Medical Research
Manuscript Number: Ms_BJMMR_28987
Title of the Manuscript: Revitalization of a Geminated Tooth with a Necrotic Pulp and an Open Apex Using Platelet–rich Plasma (PRP) and Mineral Trioxide Aggregate (MTA): A Case Report
Type of the Article: case report

General guideline for Peer Review process:

This journal’s peer review policy states that NO manuscript should be rejected only on the basis of ‘lack of Novelty’, provided the manuscript is scientifically robust and technically sound. To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

(http://www.sciencedomain.org/page.php?id=sdigieneral-editorial-policy#Peer-Review-Guideline)
### Compulsory REVISION comments

In general, the English in the paper can be understood. There are a number of terms that are not used in scientific literature when it is written in English. The editor could revise some of these terms into generally accepted scientific terms. There are some minor grammatical and typographic errors, all of which could be corrected during editing.

As the report of a research study, it should be written under the subheadings: Aim, Methods, Results, Conclusion. The words 'material' and 'discussion' should not appear in the subheadings.

The aim described in the abstract only mentions the review and not the retrospective study.

Introduction: establishes the background of the paper, the nature of the clinical phenomenon, the importance of the topic, and the rarity or novelty of the phenomenon.

Case report: describes phenomenon, patient history, examination & test results, diagnosis & treatmentDiscussion/Conclusion: justifies uniqueness of case by comparison with other cases in the literature; recommends clinical applications and future research directions

### Minor REVISION comments

### Optional/General comments

Recently, the use of platelet-rich plasma (PRP) has been proposed as a method for increasing growth factor delivery. Compared to whole blood, PRP contains increased concentrations of platelets and, therefore, platelet-derived growth factors such as transforming growth factor β (TGFβ1), platelet-derived growth factors (PDGFs), and vascular endothelial
growth factor (VEGF), which have been shown, in vitro, to promote cell migration, differentiation, and matrix synthesis. For this reason, there is great optimism that PRP may enhance the ability of injured tissues to heal, although the optimal timing and dosage is unknown. Recently, a second generation leukocyte-platelet-rich fibrin (PRF) was developed for human use. This is an entirely autologous fibrin clot with platelets and leukocytes enmeshed within it. It is a 3-dimensional, easily handled, biomaterial, which does not dissolve, but is destroyed by remodeling over time, similar to a natural blood clot. The kinetics of growth factor release from PRF have been widely studied in humans but, to the authors’ knowledge, PRF has not previously been objectively investigated in equine patients. One other disadvantage of PRP is the lack of a true-solid fibrin network. This is necessary to support the platelets; enhance cytokine function; and to act as a biologic scaffold along which repair cells may migrate.

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