

December 23, 2014

WORLD JOURNAL OF DIABETES

Dear Reviewer, (02979322)

I am pleased to resubmit for publication the revised version of ESPS Manuscript NO: 14727 *"Diabetes and periodontal disease. Review of the literature"*. I appreciated the constructive criticisms and I have addressed each of your concerns as outlined below. Thank you for giving me the opportunity to revise and resubmit this manuscript. I appreciate the time and detail provided, and I have incorporated the suggested changes into the manuscript to the best of my ability.

Specific Concerns:

1.- There is evidence showing the association between infection with *Helicobacter pylori* and levels of HbA1C and systematic reviews that show the association between *Helicobacter pylori* infection and periodontal disease.

Following the reviewer's advice, I have researched about the relationship between Helicobacter pylori infection and periodontal disease. I have added a paragraph where I tried to establish a causal association between the two entities and how the periodontal treatment may reduce gastric Helicobacter pylori recurrence.

2.- Effects of diabetes on periodontal disease and periodontal treatment. The infection with *Candida albicans*, *Candida ssp* should say.

Done.

3.- Clinical features of Candidiasis. The clinical picture would correspond to a patient with lichen or leukoplakia infected with *Candida*.

The clinical pictures correspond to a patient who suffered from acute pseudomembranous candidiasis. No lichen or leukoplakia is involved in this case.

I hope that the revisions in the manuscript and our accompanying responses will be sufficient to make our manuscript suitable for publication. If you have any questions, please do not hesitate to contact me.

Sincerely

Dr. Fernando Llambés

Dear Reviewer, (02908557)

I am pleased to resubmit for publication the revised version of ESPS Manuscript NO: 14727 *"Diabetes and periodontal disease. Review of the literature"*. I appreciated the constructive criticisms and I have addressed each of your concerns as outlined below. Thank you for giving me the opportunity to revise and resubmit this manuscript. I appreciate the time and detail provided and I have incorporated the suggested changes into the manuscript to the best of my ability.

The most substantial revisions concern the language and grammar of the manuscript. Following the reviewer's advice, I have eliminated redundant traits and rewritten parts of the paper to provide more clarity.

Specific Concerns:

1.- "The currently used classification of periodontal diseases was introduced by the 1999 International Workshop for a Classification of Periodontal Diseases and Conditions [5]" The authors have utilized the Armitage article for diagnosis and classification of periodontal disease. I would advise that the relevant chapter from Carranza's Clinical Periodontology, 12th Edition, 2014 entitled "3. Classification of diseases and conditions affecting the periodontium" should be cited as the most widely used textbook since the audience of this journal is mostly composed of physicians that may look for an authoritative source of information such as Carranza's textbook.

Following the reviewer's advice, I added references to the two most important textbooks in periodontology.

2.- "14% of them suffer from periodontitis[6]. A recent study determined that prevalence of periodontitis in the United States was 47.2% in adults ≥ 30 years " The percentages for the prevalence of periodontitis are conflicting. Please elaborate. "The National Health and Nutrition Examination Survey (NHANES) III

reported that diabetes affected 12.5% of the 1,293 individuals with periodontitis versus only 6.3% of the 12,178 individuals without periodontitis." There is a missing reference. Also please check that no data are available from the most recent continuous NHANES.

In the fist sentence, we were referring to the general population and compared it to the American population. I have reorganized the paragraph to highlight the comparison bertween populations and used the most recent data about NHANES.

Arora N, Papapanou PN, Rosenbaum M, Jacobs DR, Desvarieux M, Demmer RT. Periodontal infection, impaired fasting glucose and impaired glucose tolerance: results from the Continuous National Health and Nutrition Examination Survey 2009-2010. J Clin Periodontol 2014; 41(7): 643-652 [PMID: 24708451 DOI: 10.1111/jcpe.12258].

3.- . "It is hypothesized that periodontal infection, as a chronic bacterial infection, impairs glycemic control by increasing tissue resistance against insulin. " A reference is missing here too.

Reference has been added:

Bascones-Martinez A, Munoz-Corcuera M, Bascones-Ilundain J. Diabetes and periodontitis: A bidirectional relationship. Med Clin (Barc) 2014; [PMID: 25192582 DOI: 10.1016/j.medcli.2014.07.019]

4.- . "This hypothesis is supported by some studies that observed an improvement in the glycemic control of diabetic individuals after periodontal therapy." ref missing

References have been added:

Faria-Almeida R, Navarro A, Bascones A. Clinical and metabolic changes after conventional treatment of type 2 diabetic patients with chronic periodontitis. J Periodontol 2006; 77(4): 591-598 [PMID: 16584339 DOI: 10.1902/jop.2006.050084]

Kiran M, Arpak N, Ünsal E, Erdogan MF. The effect of improved periodontal health on metabolic control in type 2 diabetes mellitus. *J Clin Periodontol* 2005; 32(3): 266-272 [PMID:15766369 DOI:10.1111/j.1600-051X.2005.00658.x]

Stewart JE, Wager KA, Friedlander AH, Homayoun HZ. The effect of periodontal treatment on glycemic control in patients with type 2 diabetes mellitus. *J Clin Periodontol* 2001; 28(4): 306-310 [PMID: 11314885 DOI: 10.1034/j.1600-051x.2001.028004306.x]

5.- "Other studies found no such effect, possibly because insufficient" ref missing

References have been added:

Chapple IL, Genco R, Berglundh T, Eickholz P, Engebretson S, Graves D, Grossi S, Hasturk H, Kocher T, Lalla E, Lang N, Mealey B, Mealey J, Nesse W, Paquette D, Preshaw P, Taylor G, Taylor J, Van der Velden U, Walter C, Wenche B, Ylöstalo P. Diabetes and periodontal diseases: consensus report of the Joint EFP/AAP Workshop on Periodontitis and Systemic Diseases. *J Periodontol* 2013; 84 Suppl 4: S106-112 [PMID: 23631572 DOI:10.1902/jop.2013.1340011].

Sgolastra F, Severino M, Pietropaoli D, Gatto R, Monaco A. Effectiveness of periodontal treatment to improve metabolic control in patients with chronic periodontitis and type 2 diabetes: a meta-analysis of randomized clinical trials. *J Periodontol* 2013; 84(7): 958-973 [PMID: 23106512 DOI: 10.1902/jop.2012.120377]

Llambes F, Silvestre FJ, Hernandez-Mijares A, Guiha R, Caffesse R. The effect of periodontal treatment on metabolic control of type 1 diabetes mellitus. *Clin Oral Investig* 2008; 12(4): 337-343 [PMID: 18446389 DOI: 10.1007/s00784.008.0201.0]

I hope that the revisions in the manuscript and our accompanying responses will be sufficient to make our manuscript suitable for publication. If you have any questions, please do not hesitate to contact me.

Sincerely,

Dr. Fernando Llambés