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PEER-REVIEW REPORT

Name of journal: World Journal of Stem Cells

Manuscript NO: 42776

Title: Improved guided bone regeneration by combined application of unmodified, fresh autologous adipose derived regenerative cells and plasma rich in growth factors: A first-in-human case report and literature review

Reviewer's code: 03471268

Reviewer's country: Japan

Science editor: Ying Dou

Date sent for review: 2018-10-19

Date reviewed: 2018-10-26

Review time: 7 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input checked="" type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

Authors wrote the report about new combination approach of guided bone regeneration.

I consider that this method is meaningful for the clinical use, because UA-ADRCs are

easier to use than other MSCs. Although it is a single case report, they compare the 2 method by using left side and right side. I suggest some points needed to be corrected.

<Major points> • Authors mentioned that previous method need to be improved. However, its reason is not written clearly. Previous method would be not so much satisfactory for clinical use because of strength or durability. It is also needed to be mentioned which kind of adverse event occur after the conventional approach. And if possible, it is needed to be mentioned whether this new approach reaches satisfactory level or not. • All of Fig. 6, 7, and 8, are hematoxylin and eosin stain of biopsies. I couldn't understand why authors divided to 3 parts. Especially about fig.7, there is no detail description in main manuscript. If authors don't need to mention anything about fig.7, it may be not needed. • In the result they wrote that osteoclast were increased in the sample with UA-ADRCs 6 weeks after the procedure. This effect is seemingly opposite reaction in the aspect of bone formation. Therefore, reason or estimated mechanism for this phenomenon is needed.

<Minor points> • At line 1 on page 21, "osteoblasts'4" would be a spelling mistake.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

- ☐ The same title
- ☐ Duplicate publication
- ☐ Plagiarism
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[] Plagiarism

[Y] No



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PEER-REVIEW REPORT

Name of journal: World Journal of Stem Cells

Manuscript NO: 42776

Title: Improved guided bone regeneration by combined application of unmodified, fresh autologous adipose derived regenerative cells and plasma rich in growth factors: A first-in-human case report and literature review

Reviewer's code: 03077466

Reviewer's country: China

Science editor: Ying Dou

Date sent for review: 2018-10-11

Date reviewed: 2018-10-31

Review time: 19 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input checked="" type="checkbox"/> Grade C: Good	polishing	<input checked="" type="checkbox"/> Accept	<input type="checkbox"/> Onymous
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade C: A great deal of	(General priority)	Peer-reviewer's expertise on the
<input type="checkbox"/> Grade E: Do not	language polishing	<input type="checkbox"/> Minor revision	topic of the manuscript:
publish	<input type="checkbox"/> Grade D: Rejection	<input type="checkbox"/> Major revision	<input checked="" type="checkbox"/> Advanced
		<input type="checkbox"/> Rejection	<input type="checkbox"/> General
			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The manuscript by Solakoglu Ö et al. describes a case report and literature review. In the case, a 79-year old patient was treated with a bilateral external sinus lift procedure as

well as a bilateral lateral alveolar ridge augmentation. Bone healing of GBR-MSA/LRA is superior to that of MCBPA/PRGF-2/saline, and also no inflammation was observed. So guiding bone regeneration in maxillary sinus augmentation with a combination of UA-ADRCs, PRGF-2 and an OIS as performed shows effectiveness without adverse effects. Overall, it is an interesting story. There are some minor questions to be improved. 1. There are lack of sections about the methods and materials in the manuscript. 2. The components such as growth factors of plasma fraction 2 should be confirmed. 3. The isolated UA-ADRCs should be analyzed.

INITIAL REVIEW OF THE MANUSCRIPT

Google Search:

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BPG Search:

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PEER-REVIEW REPORT

Name of journal: World Journal of Stem Cells

Manuscript NO: 42776

Title: Improved guided bone regeneration by combined application of unmodified, fresh autologous adipose derived regenerative cells and plasma rich in growth factors: A first-in-human case report and literature review

Reviewer's code: 03671529

Reviewer's country: Russia

Science editor: Ying Dou

Date sent for review: 2018-10-19

Date reviewed: 2018-10-31

Review time: 12 Days

SCIENTIFIC QUALITY	LANGUAGE QUALITY	CONCLUSION	PEER-REVIEWER STATEMENTS
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	<input type="checkbox"/> Accept	Peer-Review:
<input checked="" type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language	(High priority)	<input checked="" type="checkbox"/> Anonymous
<input type="checkbox"/> Grade C: Good	polishing	<input type="checkbox"/> Accept	<input type="checkbox"/> Onymous
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			<input type="checkbox"/> No expertise
			Conflicts-of-Interest:
			<input type="checkbox"/> Yes
			<input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The article is devoted to the burning problem: developing an approach to improve guided bone regeneration (GBR) in oral surgery. Despite the fact that it was case report

study design, histochemistry, justification for the use of the cell type is at a high level. But there are a few comments: 1) The article does not describe in detail the shortcomings of the “old” methods of restoring bone volume. Maybe the newly formed bone tissue was absorbed, the implants fell out or staggered, causing discomfort in patients? 2) In my opinion, it is necessary to characterize transplanted cells, since the proliferative potential can vary greatly from person to person and depends on age. And for subsequent studies to obtain a comparable result, it is necessary to know the number of MSCs in samples, their ability to differentiate precisely in the osteogenic direction. The authors decided not to characterize the transplanted cells referring to the article, which characterized porcine UA-ADRCs, which is not entirely correct. 3) The authors indicate the advantage of using UA-ADRCs is that you do not need to wait and spend time on cultivation. But with such long periods of treatment and rehabilitation (34 weeks, 32 months), the time for cultivation does not play a significant role. Especially often before the bone grafting is necessary to treat the teeth, this time can be spent on standardization of the transplanted cells.

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BPG Search:

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