

Principle points

1. The British Society for Paediatric Dentistry welcomes this well conducted, comprehensive and well written report.
2. The conclusions are justified and point out the poor quality and very limited evidence available. Although the Society supports the statement on page 88 “... insufficient to conclude that it is cost-effective addition to the treatment of occlusal and root caries.” There is an implication that the technique is effective but not cost-effective, the evidence would not appear to support any statement that this technology is effective (P53).
3. It is disappointing that a technology with so little published data should have been selected for assessment. The production of this report must have required considerable resources. The process which lead to the selection of the dental use of Ozone must be called into question, as there are a number of other technologies in dentistry more worthy of this approach (ie care of paediatric oncology patients, single tooth resin retained bridges vs implants etc).

Minor points

1. The use of sealants is not always clear on some occasions this refers to pit and fissure sealants used on the occlusal surface and on other occasions to a root surface sealant, which type of sealant is being discussed should be made clear on every occasion.
2. Page 89. Reference 9 Ricketts is spelt incorrectly.