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OPEN PEER REVIEW

Tear Trough Deformity Refinement by an Innovative Hyaluronic Acid Injectable Filler

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About this report

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1 Original submission

4 comments · 25 Jun 2025 – 2 Jul 2025

Referee 1 Reviewer

MINOR REVISION 25 Jun 2025

A very well-scripted manuscript.

Referee 2 Reviewer

MINOR REVISION 30 Jun 2025

1. In the abstract, the background section could benefit from more detail on the current treatment modalities for tear trough deformities. The abstract gives a good overview but could include more specific details about the filler's composition, technology, and how it differs from existing fillers.
2. In the abstract, there's also a minor inconsistency with the naming of the filler technology ("SCEDIS-MSCS"), which could be briefly defined earlier in the abstract for clarity.
3. In the introduction, the goals of the pilot study are not fully emphasized. While it mentions evaluating efficacy and safety, this could be stated more explicitly to create a clearer purpose for the study.
4. In the statistical analysis section (Statistical Significance): The use of a significance level of α=0.10 is noted, which is typically higher than conventional thresholds (usually α=0.05). This decision needs further justification, especially in a study of this nature, where the results can have clinical implications. Using a more standard significance level would help validate the findings.
5. The discussion makes claims about the filler's effectiveness based on statistical results but does not address potential biases or confounding factors in depth. For instance, the lack of a control group means that the improvement could be due to other factors such as the placebo effect or natural aging processes.

Associate Editor

MAJOR REVISION 2 Jul 2025

Dear EIC,
Thanks for the invitation.
This study evaluates the efficacy and safety of a novel hyaluronic acid (HA) filler (20 mg/ml) using SCEDIS-MSCS technology for tear trough deformity correction in a prospective single-arm pilot trial. The manuscript needs some revisions as mentioned by the reviewers. All comments should be answered, and changes based on the comments should be made accurately in the manuscript file.

Editor-in-Chief

MAJOR REVISION 2 Jul 2025

Dear Author,
Thank you for submitting the article. It needs some revision. Please revise it based on the reviewers' and AE's comments.

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Revision 1

AUTHORS' RESPONSE TO REVIEWERS

Authors' reply to reviewers

The next pages contain the authors' point-by-point reply to the comments of this revision round, as submitted with the revised manuscript. It is published as the authors wrote it.

Dear Editorial Team,

We would like to thank you for your valuable time and interest in our work. I am pleased to submit our revised version along with our replies to your comments (please see our answers below).

The revised manuscript has been uploaded so that you can easily track the changes that were made in-text.
For any further clarification, please do not hesitate to contact us.
Yours Sincerely,
Dr. Eleftheria Tampouratzi

Reviewer 1:

1. *In abstract, The background section could benefit from more detail on the current treatment modalities for tear trough deformities. The abstract gives a good overview but could include more specific details about the filler's composition, technology, and how it differs from existing fillers.*

Thank you for your comment. In abstract - background section more details were added concerning current treatment modalities and complications for tear trough area. Also in abstract –objectives section more specific details about this new filler technology also was added.

2. *In abstract,There's also a minor inconsistency wobjective section in the naming of the filler technology ("SCEDIS-MSCS"), which could be briefly defined earlier in the abstract for clarity.*

Thank you for your comment. Towards this direction, we added in abstract- objective section the full name of the filler technology that was used.

3. *In introduction, The goals of the pilot study are not fully emphasized. While it mentions evaluating efficacy and safety,*

this could be stated more explicitly to create a clearer purpose for the study.

Thank you for the suggestion. In introduction, we emphasized the goals of the pilot study and gave more explicity to our purpose.

4. *In statistical analysis, Statistical Significance: The use of a significance level of α=0.10 is noted, which is typically higher than conventional thresholds (usually α=0.05). This decision needs further justification, especially in a study of this nature, where the results can have clinical implications. Using a more standard significance level would help validate the findings.*

Thank you for your comment. In statistical analysis field we added more detailed justifications. We also added in result area more details about the study: a figure was added for GAIS score and a supplementary table concerning Statistical Summary of GAIS and TTIS Results was also provided.

5. *The discussion makes claims about the filler's effectiveness based on statistical results but does not address potential biases or confounding factors in depth. For instance, the lack of a control group means that the improvement could be due to other factors such as placebo effect or natural aging processes.*

Thank you for the comment. We improved discussion area adding the lack of control group and the potential biases, also the limitations after discussion part emphasize the above comments.

2 Revision 1

4 comments · 13 Aug 2025 – 16 Aug 2025

Referee 1 Reviewer

ACCEPT 13 Aug 2025

A well-designed manuscript and outstanding work.

Referee 2 Reviewer

ACCEPT 15 Aug 2025

All issues have been addressed

Associate Editor

ACCEPT 16 Aug 2025

Dear EIC.
Previous errors have been corrected, and there are no further recommendations.

Editor-in-Chief

ACCEPT 16 Aug 2025

Dear Authors,
Your revisions have significantly improved the article, and it is now deemed acceptable for publication.
Congratulations on your hard work and dedication to enhancing the quality of your work.