

Review of: "DIAGNOSTIC ACCURACY OF BONE SCINTIGRAPHY IN THE EARLY PREDICTION OF MRONJ"

ONUR ŞAHİN¹

¹ İzmir Katip celebi University

Potential competing interests: The author(s) declared that no potential competing interests exist.

The adverse effects of bisphosphonates on quality of life and increased morbidity, the researchers have led to the investigation of early diagnosis and effective treatment. Therefore, it is important to know the early detect areas in MRONJ management. This study could be interesting and valuable for early detection of MRONJ lesions, but unfortunately no distinct question or hypothesis is formulated, which should be answered by the study. Firstly, the mechanism of action of bisphosphonate and denosumab drugs is different. Unlike bisphosphonates, Denosumab does not bind to the hydroxyapatite crystals of the bone to show its osteoclastic effect, but binds to RANK-L inhibitors and disperses into the extravascular space and does not bind to the bone itself. Denosumab is absorbed rapidly, with a serum half-life of 25 to 29 days, the serum concentration peak is achieved at approximately 10 days. The effect of denosumab on bone remodeling is reversed shortly and bone turnover normalizes a few months after discontinuation of the drug (1,2). In my opinion, for the study to be even more valuable, it should be studied only in patients receiving IV bisphosphonates. In addition, the MRONJ stage should be specified and the number of patients should be increased. Thank you for your valuable work and great effort.

Sincerely...

References

1. Ohga N, Yamazaki Y, Tsuboi K, et al. (2015) Healing of osteonecrosis of the jaw (ONJ) after discontinuation of denosumab in a patient with bone metastases of colorectal cancer: a case report and hypothesis. *Quintessence Int* 46(7):621–626. doi: 10.3290/j.qi.a33528. PMID: 25646168.
2. Şahin O, Odabaşı O, Ekmekcioğlu C. (2019) Ultrasonic Piezoelectric Bone Surgery Combined With Leukocyte and Platelet-Rich Fibrin and Pedicled Buccal Fat Pad Flap in Denosumab-Related Osteonecrosis of the Jaw. *J Craniofac Surg.* 30(5):e434-e436. doi: 10.1097/SCS.00000000000005472. PMID: 31299805.