variable. The same figure shows that the *P* value for age is 0.070, making it a significant variable. However, it was stated to be not significant in the Results section.

The article states that the study is a retrospective longitudinal design. Moreover, the cone-beam computed tomography (CBCT) images were retrospectively analyzed. However, the flowchart of the experimental design depicts the study as prospective because it starts with *Patients*, followed by *CBCT scanning at the Radiology Department* (Fig 2). Kindly explain the variation.

The Introduction states that lateral incisor root resorption could be detected 37% more by CBCT than with 2-dimensional radiographs; Ericson et al[1] was cited to justify this statement. However, the referred article does not report CBCT but rather describes radiographic examination and polytomography. Moreover, CBCT was introduced to dental offices in the late 1990s.[2]

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REFERENCE

1. Ericson S, Kurol J. Radiogphic exmination of ectopically erupting maxillary canines. Am J Orthod Dentofacial Orthop 1987;91:483-92.
2. Kailash S. CBCT- Cone beam computed tomography. J Dent Educ 2014;1(1):9-15.

Author's response

Thank you for the insightful commentary on our manuscript. We appreciate this opportunity to explain some doubts raised in your letter.

The *P* value for age mentioned in Figure 10 ($P = 0.070$) was the result of the Wilcoxon test. This test suggested that age might be 1 possible risk factor for severe lateral incisor root resorption. Then, all the possible risk factors, including age, were tested with the binary logistic regression to screen the predictors for severe lateral incisor root resorption. The result of binary logistic regression for age was $P = 0.387$, which showed that no significant difference was found between the study group and the control group. Please note that age was stated to be not significant in the Results section, which represented the result of binary logistic regression.

The flowchart of the experimental design was added to elucidate the process of obtaining and analyzing clinical data. In fact, this study was designed and implemented in 2018 using cone-beam computed tomography (CBCT) images screened from 2016 to 2017, matching the definition of a retrospective study. Thank you for offering us an opportunity to clarify this point.

Regarding the third question raised in the letter, ever since a symposium on Craniofacial Imaging in the 21st Century was held in 2002 in Pacific Grove, Calif, CBCT technology has undergone a rapid evolution.[1] CBCT nowadays could provide accurate images and information about root morphology as the subjects could be observed at any angle using 3-dimensional reconstruction.[2] It is widely known as a reliable detector for craniomaxillofacial deformity. With good imaging quality and proper clinical skills, nearly all patients with root resorption can be observed by CBCT-based clinical examination. As for the referred literature in our article (Ericson et al),[3] the researchers stated that 37% of the lateral incisors affected by root resorption appeared normal on the 2-dimensional radiographs. If CBCT had been introduced to dental offices at that time, these 37% neglected patients could have been treated earlier. We attempted to convey this understanding in the introduction of our article when we wrote that "lateral incisors root resorption could be detected 37% more by CBCT than with 2-dimensional radiographs."

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REFERENCES

1. Kapila SD, Nervina JM. CBCT in orthodontics: assessment of treatment outcomes and indications for its use. Dentomaxillofac Radiol 2015;44:20140282.
2. Deng Y, Sun Y, Xu T. Evaluation of root resorption after comprehensive orthodontic treatment using cone-beam computed tomography (CBCT): a meta-analysis. BMC Oral Health 2018;18:116.
3. Ericson S, Kurol J. Radiographic examination of ectopically erupting maxillary canines. Am J Orthod Dentofac Orthop 1987;91:483-92.