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Journal Name:	Journal of Advances in Medical and Pharmaceutical Sciences
Manuscript Number:	2014_JAMPS_12865
Title of the Manuscript:	Is Cystoid Macular Edema More Frequent In Vitrectomized Internal Limiting Membrane-peeled Eyes Undergoing Phacoemulsification?
Type of the Article	

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This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	I think the authors got a point in this study, since there is no CME in phakic patients. It is well known in the literature that IML peel in macular hole surgery is essential for closure, especially in advanced stages. Maybe the anterior segment surgery and not the ILM peeling is what cause CME. We cannot incriminate ILM peeling for CME if there is not a control group of PPV without ILM peeling. This study differs from the Vienna's because this is retrospective (no control) but shows, unlike the first study, that phakic eyes have a less frequent CME. Specific comments ABSTRACT: Try to abolish abbreviations in this section METHOD: There is a lack of information about demographics, the stage of the MHs and, time lag between both surgeries, when apply.	We accept that abbreviations can be off-putting. We have removed several abbreviations (PE, PPV and FTMH) to make the text easier to read. Line 82 The mean age of the 43 patients in this study was 68.1 ± 12.7 years. The mean stage of FTMH was 3.0 ± 0.6. 67% of patients in this study were female. Line 88 Group 3 had a mean 12.3 (± 11.1) months interval between procedures. The interval between procedures is not known for group 4, as



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	RESULTS: There is no statistic test comparing the tree groups (why? We need a comment). Only the percentages seem to be different. CONCLUSIONS: Since there is no statistic comparing the tree groups, we suggest the authors do not recommend the combined surgery.	their first procedures were performed in other units and the exact details were unavailable. We had included the P values in the table. Line 172 P value. Result of ANOVA comparison between groups 2, 3 and 4 with group 1. $P < 0.05$ was taken as statistically significant. Line 157 In conclusion, we report a trend towards a higher incidence of CME in vitrectomized ILM-peeled eyes when PE is performed subsequently, than other sequences with PE.
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		