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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	

General guideline for Peer Review process:

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	- Scientific design of the paper is poor and no statistical analysis was performed - - - - - - - - In fact, the conclusion stated by authors suggesting combined phaco-vitrectomy, rather than pars plana vitrectomy followed by phacoemulsification is based on the results of Table 1, which, although showed a trend to support the hypothesis and the conclusion made by authors, lacks statistical analysis to ascertain significant differences. - I agree with the authors in that sample size is limited. Indeed, they only had 6 patients that developed cystoid macular edema after the procedures, which does not allow to obtain reliable results to confirm the hypothesis. - - - - - -	We have significantly changed the paper, we had added statistical analysis to our results Line 174 Table 1 Line 84 The mean ($\pm$ standard deviation; SD) LogMAR best-corrected mean visual acuity (BCVA) for all patients improved significantly from 0.85 ± 0.37 to 0.49 ± 0.37 at 12 months postoperatively (student's t-test: $p = 0.001$, Figure 1.) - We have changed our conclusion line 158 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. - We acknowledge this weakness. This paper could be used as evidence to support a prospective study. - Line 144 - This is the first study to use a compare the rate of CME in both sequences of PE before or after PPV/ILM peel with combined surgery and with patients who had PPV/ILM peel without PE. This is the first paper to our knowledge, to report an incidence for CME post PPV/ILM peel alone (Table 1). Our study



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	- - - - - - - Study population is not described and demographic data of the patients are missing.	is limited by sample size and retrospective design. This limits our ability to extrapolate, however, this evidence justifies a large prospective randomized trial to elucidate the relative risk of the timing of phacoemulsification in such patients. - Line 83 - 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.
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<u>Minor</u> REVISION comments	- In “Materials and methods” authors describe an “increased central macular thickness(CMT)”. However, no breakpoint is given by bthe authors (i.e. CMT > 240um). - Misspellings and poor grammar, as well as awkward sentences, make interpretation of the manuscript difficult to read. - The length of the abstract is excessive. It should be shortened to fulfil standard publication guidelines. -	Line 70 associated with increased central macular thickness (CMT > 250µm was taken as increased[12]) on spectral domain OCT (Cirrus HD-OCT, Carl Zeiss Meditec, Dublin, CA, USA). - We have substantially altered the text. We have altered the abstract and reduced the size. Line 6
<u>Optional/General</u> comments	According to the conclusion, the study seems to elucidate that there is a higher risk for developing cystoid macular edema when pars plana vitrectomy is followed by phacoemulsification and that the best option is to perform a combined surgery. However, this data are not fully analyzed in the study. Instead, manuscript appears to be tailored to describe the outcome of the patients that develop cystoid macular edema.	We have performed further analysis Line 163 P value. Result of ANOVA comparison between groups 2, 3 and 4 with group 1. P < 0.05 was taken as statistically significant.