



SDI Review Form 1.6

PART 1:

Journal Name:	<u>Ophthalmology Research: An international Journal</u>
Manuscript Number:	2013_OR_4127
Title of the Manuscript:	Retinal astrocytoma: a supportive finding in Tuberous sclerosis
Type of the Article	Case study

General guideline for Peer Review process is available in this link:

(<http://www.sciencedomain.org/page.php?id=sdi-general-editorial-policy#Peer-Review-Guideline>)

- This form has total 7 parts. Kindly note that you should use all the parts of this review form.



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PART 2: 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	The clinical diagnosis of tuberous sclerosis was made before the ophthalmic examination. Presence of retinal astrocytoma is one of the major diagnostic criteria of tuberous sclerosis. Considering there are no pathognomic signs for the diagnosis. The authors seemed to be considering only retinal astrocytoma as a diagnosis . How was the vision recorded in a mentally retarded child as 20/20.	The diagnosis of tuberous sclerosis was only suspected in paediatric department and the establishment of this clinical diagnosis was done after ocular evaluation. Out of the 11 major and 9 minor diagnostic criterias of TS, eye findings contribute to 1 major (Multiple retinal nodular hamartomas) and 1 minor criteria (Retinal achromic patch). And Definite diagnosis of TS is done with Either two major features or one major feature plus two minor features and Probable diagnosis of TS is done with One major plus one minor feature. Hence, we believe presence of retinal astrocytoma can significantly aid in the diagnosis of TS in presence of other systemic features. The vision in case 1 could be recorded with Snellen's chart as the child was a grade V



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	The differential diagnosis of the retinal lesions should be discussed . Was the astrocytoma calcified?Because diagnosing a non-calcified astrocytoma can be challenging especially in a fairly pigmented individual Was fluorescein angiography done? Discuss the findings.	student and his IQ level was just subnormal ie gross mental redartdation was not present The differential diagnosis have been added in introduction and discussed in discussion part. The astrocytoma in case 1 was calcified and in case 2 was noncalcified but its diagnosis was not challenging because the child is from South Asia and was heavily pigmented. Unfortunately, due to the subnormal mental status of these children, FFA was not attempted.
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<u>Minor</u> REVISION comments	Was evaluation of lung done as it is of prognostic significance.	Evaluation of all the systems including the lung was done in the paediatric department.
<u>Optional/General</u> comments	The relevance of IOP measurement and axial length measurement needs to be justified . Special note: Patients identity is revealed in the clinical photograph. Was the consent for the same taken?	