



SDI Review Form 1.6

PART 1:

Journal Name:	<u>Ophthalmology Research: An international Journal</u>
Manuscript Number:	2013_OR_4795
Title of the Manuscript:	Vitamin D deficiency may be a risk factor for ophthalmopathy in patients with Graves' hyperthyroidism but not Hashimoto's thyroiditis
Type of the Article	Research paper

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 authors summarize a retrospective clinical study showing that Vitamin deficiency is significantly associated with ophthalmopathy in 64 patients with Graves' hyperthyroidism but not Hashimoto's thyroiditis. 1. Authors should consult with a statistician, since the chi square test is inadequate in this setting. Their results would benefit from a Regression analysis to examine if vitamin D deficiency predicts which patients develop Ophthalmopathy, and follow with an odds ratio to describe the strength of this association. 2. The authors fail to include in their introduction and discussion several landmark articles on Vit. D. Deficiency and autoimmune thyroid disease. I am not suggesting that the proposed manuscript does not add to existing literature; it does and has potential interest. However, the discussion would not	Thank you for this point, however, we cannot do regression analysis, we can only correlate Vitamin D level with ophthalmopathy, regression analysis would be appropriate in a future prospective study where we would correlate Vitamin D level with eye muscle antibodies levels NOSPECS class, CAS etc., Vitamin D level Vs. Severity of ophthalmopathy and /or calsequestrin 1 and collagen VIII antibodies, respectively. This question discussed in discussion lines: 194– 203 We are grateful to the reviewer for bringing to our attention these landmark papers which are accordingly incorporated in the body of text in Discussion lines: 177- 193



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	be complete without referring and discussing the current findings in light of at least the following: Endocrine 2013. 43(2): 318-26. A metanalysis of 8 studies on the link of vit. D deficiency and ATD Endocrine 2013. 43(1):230-272 Endocrine 2012. 42(3): 739-741	
<u>Minor</u> REVISION comments	I recommend that the authors note that both the American Thyroid association and the European EUGOGO issued a statement recommending that the NOSPECS be discontinued as a thyroid ophthalmopathy tool, especially in research.(Bahn, 2008; Dolman & Rootman, 2006) The modified CAS and the VISA scales are preferable.	We have always used the NOSPECS and Nunery and modified CAS (as in this manuscript) and find these useful. The VISA is far too complicated. CAS describes the activity and NOSPECS the severity, better then any other systems. The senior author was a member of the committee to look at nomenclature and is well aware of the issues. In future studies we will consider using other systems as well, if helpful. We thank the reviewers for the criticisms and comments, all of which are valid and important. Our manuscript was carefully revised by responding to all of the points raised and is, we believe, improved as a result. We hope that the revised manuscript will now be acceptable for publication in the Journal.
<u>Optional/General</u> comments		