



SDI FINAL EVALUATION FORM 1.1

PART 1:

Journal Name:	Ophthalmology Research: An international Journal
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

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
The authors have not included their MNG control group in the abstract. Whether patients with Graves Ophthalmopathy have a higher rate of Vitamin D deficiency than other GD patients without Ophthalmopathy, Since in my prior comment I referred the authors to existing well performed studies showing Vitamin D deficiency is more common in Graves disease. I urge the authors to familiarize themselves and make future use only of CAS scoring, the scoring system for Graves Ophthalmopathy formally endorsed by both the European (EUGOGO) and the American Thyroid Associations, since NOSPECS is not suitable for research. Please address this further in your final revision.	In Abstract, Page 2, Lines 59: and 88% of patients with Multinodular goitre control group In Abstract, Page 2, Lines 63 – 65: Thirty nine % of Graves' patients who were vitamin D deficient and 25% of those who were vitamin D insufficient had no ophthalmopathy, compared to 73% of patients who were vitamin D replete. In Results and Discussion, Page 5, Lines 161 – 163 In Abstract, Page 3, Lines 77 – 78: It appears that Graves' patients with ophthalmopathy have a greater propensity to vitamin D deficiency as compared to Graves' patients without ophthalmopathy. In Results and Discussion, Page 6, lines 163 -165 The suggested reference included in page 6 line 177 and in page 10, reference list as number 22 In Clinical Subjects, Page 4, Lines 122 124 have been added explaining why we did not use the VISA protocol; however, we agree that in future studies we would, for the first time use the VISA which may be the best overall tool for prospective clinical studies. Please note that the senior author was a member of the committee to look at nomenclature and is well aware of the issues. In future we will consider using other system as well, if helpful.

PS: Please address the following poorly typed or written paragraph:

sunlight and food. while it is likely that vitamin D deficiency does play a role in the pathogenesis of te eye disorder, and that repletion would improve the signs, this needs to be addressed in a large multi centre study of patients with Graves' disease and Hashimoto's thyroiditis, correlating eye changes with serum calsequestrin, collagen XIII and TSHR antibody levels and vitamin D levels We would also address the roles of other risk factors such as smoking, stress, severity of the thyroid reactions.

Revised above paragraph: Page7, lines 219 - 224

While it is likely that vitamin D deficiency does play a role in the pathogenesis of the eye disorder, and that repletion would improve the thyroid eye signs, this needs to be addressed in a large multi centre study of patients with Graves' disease and Hashimoto's thyroiditis, correlating eye changes with serum calsequestrin, collagen XIII, TSHR antibody and vitamin D levels. We would also address the roles of other risk factors such as smoking, stress, severity of the thyroid eye disease in patients with Graves' ophthalmopathy.