



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An international Journal
Manuscript Number:	2014_OR_11816
Title of the Manuscript:	Diplopia and strabismus in diabetics (Type II) and non diabetics in Yazd, Iran
Type of the Article	Original Research 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)
<u>Compulsory</u> REVISION comments	1. In the discussion section the author mentions that similar results were obtained from other studies. It seems the purpose of the In addition, the author concludes the paper by recommending larger and more refined studies. Then why is this paper relevant? 2. There is a statistical difference in the mean age between the two groups, yet the author neglects to address this issue. If there are two variables (i.e., DM and age), the result is inconclusive. If the difference in age does not affect the study, then the evidence must be presented. Moreover, the author mentions that the majority of patients with diplopia/strabismus in the study had other systemic conditions that could lead to diplopia/strabismus. It seems there are too many variables to analyse the data and draw any meaningful conclusion. 3. Too many grammatical errors (e.g., random capitalizations, incorrect use of passive voice, inappropriate abbreviations). "recommended"? That is not even a word. 4. I'm confused with the inclusion criteria. The author indicates that patients with diplopia were excluded from the study. Then why do patients report diplopia? Did they develop it after the questionnaire was completed? Congenital strabismus patients were excluded from the study, but it is unclear whether later onset non-paralytic strabismus (or developmental strabismus) patients were excluded.	Thanks for your valuable advice. We Corrected and revised the manuscript according to your options as possible. This study is the result of student thesis of Yazd Shahid Sadoughi University of Medical Science. We studied the incidences of potential complications of type II diabetics (diplopia and strabismus), in Yazd, Iran, and, interestingly, we found that there was no statistically difference in frequency of diplopia and strabismus between diabetics and nondiabetics. We studied diplopia and strabismus in diabetics (typeII) and surly they are older than non diabetics. On the other hands, due to the low number of cases with diplopia and strabismus in all subjects (16 cases in 3000) for matching the groups based on age we must exclude many of our subjects. So, because of age disagreement, the groups were studied based on age separately (table 2). We excluded congenial diplopia and strabismus.
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		