



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An international Journal
Manuscript Number:	2014_OR_12706
Title of the Manuscript:	Barriers to free cataract surgery in Yaoundé
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.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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



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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		
Minor REVISION comments	1. There is no full name for abbreviation "NGO" in this article? 2. Waiting for foreign NGO surgery should not be defined as "barrier to free cataract surgery", or only under condition that foreign NGO surgery is rare in Yaounde. And patients receiving cataract surgery organised by foreign NGOs should also be calculated in CSR. So what authors actually discussed in this article was "Barriers to free cataract surgery organized by local government in Yaounde". 3. Since ICCE was the main choice of the local ophthalmologist, what techniques were used in foreign NGOs? Phaco? or even SICS? Was the outcome of foreign NGO surgery better than that of local free surgery? If so, fear may still be the reason for those patients choosing awaiting for foreign NGO surgery. If not, present the statistical data and the reasons, which would be more persuasive to explain the importance of local training. 4. The percentages of patients knowing the idea of cataract surgery subvention by the state in this study group was 58.82%. What was the percentage in those accepting the surgery? Can the lower awareness of this subvention in this study group also be the reason to refuse the surgery?	1-Response:Thanks We added it in the manuscript: "Nongovernmental organisation (NGO) .line 66 2- Response: thanks. Of course foreign NGO actions are rare and sporadic. This has been précised in the manuscript line 102 and 104 Schulze Schwerng reference 7 also discussed barriers to free cataract surgery in Malawie 3- The technique used by foreign NGO is the classical ECCE and posterior IOL implantation. The outcome of foreign NGO surgery as well as that of local free surgery was good. Problems of NGOs surgery are that they are sporadic and don't assure a good post operative follow up. 4- during the study period, 688 patients were operated free of charge. We didn't enquired if they were aware of the government action before accepting operation. Only those who refused a free surgery were interviewed.



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<u>Optional/General</u> comments	This article identified fear and awaiting for foreign NGO surgery campaign were the main barriers to turnout for local free cataract surgery campaigns in Yaounde. These results emphasized the importance of improving the skills of local ophthalmologists and the quality of ophthalmic service in sub Saharan Africa.	Thanks
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