



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An international Journal
Manuscript Number:	2013_OR_7042
Title of the Manuscript:	Surgical outcome of exotropic patients' management; one year follow-up
Type of the Article	Case series

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	Abstract: Purpose – Delete your definition of strabismus, is not necessary and is not accurate. 'Exotropia is a constant deviation of visual axis which may be associated with amblyopia or diplopia.' This must be reviewed; it might not be associated neither with diplopia nor amblyopia. Exclude 'It can be managed by different approaches including surgery.' Methods- Include the marked sentence 'Surgical techniques consisted of one of the following bilateral rectus (BLR) recession, bimedial rectus (BMR) resection, Recession & resection (R&R), MR advancement and lateral rectus (LR) recession.' Results- 'Mean age of the patients was 18.2± 11.39 years' Use 11.4 and not 11.39. 'Most cases were infants.' How is this possible if your mean age is 18? Include 'Overall post-operative success rate was 67.6%' 'The most frequent complication after surgery was misalignment.' – please describe if it was over or undercorrection, or exo or esodeviation. Introduction: 'Different methods could be selected for management of various types of Exotropia, including follow-up, minus lens, prisms, orthoptic exercises, injection of botulinum toxin, eye drops or surgery' Find a better reference with more specific description of what you will analyse in your study, like types of surgery for specific types of exotropia. Methods: You must specify types of exotropia you operated on. The approaches vary according to type of exotropia. Intermittent, sensory, basic exotropia, etc.	We revised the manuscript according to the reviewer options. Changes highlighted with yellow color.



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	'Deviation measured by Alt. Prism- cover test at far and near.' How about patients who did not have a good visual acuity? Specify what parameters you collected in this questionnaire (such as VA, deviation, refraction, anterior segment exam...) Did you perform a comprehensive ophthalmic exam? Describe what surgical approach you used (limbar, fornix, adjustable or not), and if all patients were operated by the same surgeon Results: 'had alternate exotropia while 26.5% suffered from monocular type one' Do you mean monocular by sensory? What was the visual acuity? Infantile exotropia is rare, look at Biglan AW et al 1996, I think you might be misdiagnosing your cases. It is different Infantile exotropia than exotropia that is secondary to some ocular pathologies with respective low visual acuity that started during childhood. Please review that. When you state the cause is traumatic, it can be due to a third nerve palsy, secondary to low vision – such as traumatic optic neuritis, or a direct lesion to the muscle likely in globe perforations. Describe what you mean by traumatic. Change generally success rate to overall success rate. 'Under-correction and over-correction was observed in 30.4% and 2% of cases, respectively.' What was the mean deviation in PD for under and over correction? 'thirty two percent of cases didn't show satisfying alignment, among whom, 69.7% of cases had immediate post operative residual exotropia, 12.1% after 3-6 months and 18.2% after 6 months to 1 year.' Immediate alignment is not important unless you want to measure the exodrift that occurs afes	
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	surgery. Otherwise don't describe it. You could compare statistically your deviation at 6months and 1 year. 'The most frequent complications after surgery were misalignment in 33 cases (32%) and diplopia in 6 cases (5%).' Describe if this data refers to 6 months or 1 year of follow up and what kind of misalignment. Change the yellow word (you put more, and correct is greater) 'Success rate among females was greater than males but the difference was not statistically significant ($P = 0.054$). Table 1- describe the age groups without the terms (infancy, childhood...), just with numbers. Table 2: you could consider describing the spherical equivalent Discussion: You should not discuss residual or consecutive exotropia together with primary exotropia. You should consider exclude your residual/ consecutive cases, or analyze them separately. Same for rate of success. Calculate for primary exotropia (the ones who didn't have surgery before), and subtypes (intermittent / basic type/ sensory). The success rate of each kind of surgery depends on several factors, but a very important one is the type of deviation. Your number of patients if large but it would be better to have a smaller number better stratified for type of deviation, or type of surgery. Consider excluding some	
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	data to better organize what you have.	
<u>Minor</u> REVISION comments	Introduction- ‘Therefore treatment of strabismus may lead to an obvious improvement in patients’ quality of life.’Describe reference, there are articles measuring quality of life after strabismus surgery in adults. Discussion: Did you have intermittent exotropia?	
<u>Optional/General</u> comments		