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PART 1:

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

PART 2:

FINAL EVALUATOR'S comments on revised paper (if any)	Authors' response to final evaluator's comments
The revised form of the manuscript "Diplopia and strabismus in diabetics (Type II) and non diabetics in Yazd, Iran" did not address any of the issues raised by this reviewer (please find below copy of the previous review). <i>I read with interest the paper entitled "Diplopia and strabismus in diabetics (Type II) and non diabetics in Yazd, Iran". There are specific issues related to the experimental and control samples that must be addressed since they may affect the interpretation of the results.</i> <i>The authors wanted to investigate the frequency of diplopia and strabismus in diabetics (Type II) compared to non diabetics patients.</i> <i>The prevalence of diplopia and strabismus in diabetics were below the values of most studies in the literature and, surprisingly did not differ between the groups. The authors explained the results on the basis that glycemic levels in these patients, closely followed in a specialized diabetic clinic, are better controlled than in diabetics from the general population. While this is possible, one must acknowledge that the chosen control group is also inappropriate, since they are non diabetics from an ophthalmologic clinic, with other comorbidities</i>	In overall, the mean age of patients with and without diplopia was 45 ± 13.11 and 48.70 ± 17.09 respectively without statistically differences (p value= 0.346). Also the mean age of patients with and without strabismus was 46.5 ± 11.72 and 48.69 ± 17.09 respectively without statistically differences (p value= 0.608). The mean age of diabetic and non-diabetic patients with diplopia was 51 ± 13.26 and 42.23 ± 12.58 respectively, without statistically differences (p-value= 0.18). Also the mean age of diabetic and non-diabetic patients with strabismus was 51 ± 13.26 and 43.8 ± 10.47 respectively, without statistically differences (p-value= 0.24). Therefore we have ignored the role of age in frequency of diplopia and strabismus in two groups. Finding 1500 diabetic patients from general population was difficult; moreover, in our city (Yazd) diabetic patients refer to diabetic center. Otherwise, finding non-diabetic patients from diabetic center was difficult so we decided to choose patients from two different groups. We have not studied the role of some factors on diplopia and strabismus, such as ocular and systemic disease. Patients had been selected from general population (in ophthalmology clinic); that there might exist ocular and systemic disease. We have determined coexistence disease such as hypertension, hyperlipidemia and thyroid disease that is mentioned in result. Overall 9 patients (3 diabetics and 6 non-diabetics) with diplopia and strabismus had systemic disease comorbidity. We just have determined the frequency of diplopia and strabismus in two groups. In future, it needs to do another study to determine the role of some factors on diplopia and strabismus.



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(ocular and systemic) that may influence the outcomes, and not non-diabetic from the general population as it should be expected.

Moreover, one may note that the mean ages from the two samples are different (61.04 ± 10.84 vs. 36.32 ± 12.63), which may also influence the prevalence of the two variables investigated.

Therefore the patient samples did not include an appropriate spectrum of the disease and no disease. The lack of representative samples prevents the appropriate assessment of the proposed goal – to determine the frequency of diplopia and strabismus in diabetics vs. non diabetics.