



SDI FINAL EVALUATION FORM 1.1

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
1. The authors wrote <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). Moreover, 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 ignored the role of age in frequency of diplopia and strabismus in two groups."</i> I'm not sure they can conclude that the age is irrelevant based on the above statistical analysis. I think better approach would be to look into other researches and (if possible) show that the age is not correlated to the prevalence of strabismus. Another option is to use smaller patient samples so that two groups will be statistically non-significant in their age. 2. The authors presented the outcome of the table 2, but they really need to explain the purpose and the meaning of the result. 3. Grammatical errors are NOT corrected (e.g. random capitalizations and incorrect use of passive voice). Here are some examples... <i>"The ability to maintain the alignment of visual axis depends on Coordination of eye movement."</i> <i>"Often ophthalmoplegia is seen in patients with mild and long term diabetes, so it associated with complications such as retinopathy, neuropathy and lens opacity⁶."</i>	1- Thanks for your valuable advice. We have studied other papers but unfortunately, we couldn't find an appropriate explanation. There are many risk factors for strabismus but we didn't study them. We determined the number of patients in our study according to the other researches' statistical data that they were based on the prevalence of diplopia and strabismus. 2- We conclude from table 2 that effect of diabetes on cranial nerve palsy is stronger than age. So statistical difference in the mean age between two groups don't have strong effect on result of our study. 3- Grammatical errors are corrected.