



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	2015_OR_17957
Title of the Manuscript:	Cytomegalovirus retinitis: current state in people with HIV-AIDS in Peru
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>)



SDI Review Form 1.6

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	How long was IV ganciclovir given and at what dose? (e.g./total mg/kg) Similar for intravitreal and oral ganciclovir. What were the side-effects of ganciclovir? Particularly liver function and hematological side-effects should be noted. If these data are not available, this must be listed as a limitation of the study. The epidemiologic data of MVR in HIV patients in Peru are critical data that should be published. The missing toxicity/dosage/duration of ganciclovir should be recorded, if possible. These data should be compared with similar and more advanced countries.	Endovenous ganciclovir was given for two weeks at 7,5 to 15 mg/kg/day followed by maintenance therapy of 5mg/kg/day. Intravitreal ganciclovir induction dose was 1000 µgr/0.1 ml twice weekly for the first week and maintenance dose one weekly to see inactivity of the disease. Oral ganciclovir was given for maintenance therapy at 1 g three times a day. It should be noted as a limitation of the study have not recorded the side effects of systemic treatment with intravenous ganciclovir as neutropenia, thrombocytopenia, rash, nephrotoxicity, and gastrointestinal symptom whose incidence is reduced with oral treatment.
<u>Minor</u> REVISION comments		
<u>Optional/General</u> comments		