

PEER-REVIEW REPORT

Name of journal: *World Journal of Clinical Cases*

Manuscript NO: 85010

Title: Evaluation of childhood developing via Optical coherence tomography-angiography (OCTA) in Qamdo, Tibet, China: a prospective cross-sectional, school-based study

Provenance and peer review: Unsolicited Manuscript; Externally peer reviewed

Peer-review model: Single blind

Reviewer's code: 02862753

Position: Editorial Board

Academic degree: MD

Professional title: Full Professor

Reviewer's Country/Territory: Lebanon

Author's Country/Territory: China

Manuscript submission date: 2023-04-14

Reviewer chosen by: Geng-Long Liu

Reviewer accepted review: 2023-06-18 04:32

Reviewer performed review: 2023-06-18 05:41

Review time: 1 Hour

Scientific quality	<input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Very good <input type="radio"/> Grade C: Good <input type="radio"/> Grade D: Fair <input type="radio"/> Grade E: Do not publish
Novelty of this manuscript	<input checked="" type="radio"/> Grade A: Excellent <input type="radio"/> Grade B: Good <input type="radio"/> Grade C: Fair <input type="radio"/> Grade D: No novelty

Creativity or innovation of this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No creativity or innovation
Scientific significance of the conclusion in this manuscript	<input checked="" type="checkbox"/> Grade A: Excellent <input type="checkbox"/> Grade B: Good <input type="checkbox"/> Grade C: Fair <input type="checkbox"/> Grade D: No scientific significance
Language quality	<input checked="" type="checkbox"/> Grade A: Priority publishing <input type="checkbox"/> Grade B: Minor language polishing <input type="checkbox"/> Grade C: A great deal of language polishing <input type="checkbox"/> Grade D: Rejection
Conclusion	<input type="checkbox"/> Accept (High priority) <input type="checkbox"/> Accept (General priority) <input checked="" type="checkbox"/> Minor revision <input type="checkbox"/> Major revision <input type="checkbox"/> Rejection
Re-review	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Peer-reviewer statements	Peer-Review: <input type="checkbox"/> Anonymous <input checked="" type="checkbox"/> Onymous
	Conflicts-of-Interest: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

SPECIFIC COMMENTS TO AUTHORS

The current study is novel as it measures OCTA parameters in children at a high altitude. The study is well conducted and well written. The major handicap of the study: Fundus landmarks require correcting for the magnification factor induced by myopia. Ocular magnification significantly affects the results of retinal and CC blood flow quantification with OCTA in myopic eyes. For accurate determination of the OCTA derived parameters in myopia, magnification correction should be taken into consideration (Dai Y, Xin C, Zhang Q, Chu Z, Zhou H, Zhou X, Qiao L, Wang RK. Impact of ocular magnification on retinal and choriocapillaris blood flow quantification in myopia with swept-source optical coherence tomography angiography. Quant Imaging Med Surg. 2021 Mar;11(3):948-956. doi: 10.21037/qims-20-1011). All fundus cameras suffer from ocular magnification related to myopia and this needs to be corrected using the formula according to Mansour AM. Measuring fundus landmarks.

Invest Ophthalmol Vis Sci. 1990;31:41-2. [PubMed] [Google Scholar] So how can we solve this problem by 3 ways: (1) Acknowledge the limitations i.e. the authors did not correct for myopic magnification and hence the change with age could be secondary to increase in myopia and not age related per say. Moreover a brief look at myopia progression would add to the paper if available. (2) OR show the average of the refraction per age and correct the final OCTA values according to myopia (3) OR correct all initial OCTA parameters for myopic magnification and redo all calculations (meaning start from scratch)