

Dear Editors and Reviewers,

On behalf of my co-authors, thanks very much for taking your time to review this manuscript. We really appreciate all your generous comments and suggestions! Please find my itemized responses in below and my revisions in the re-submitted files.

**Reviewer #1 (Specific Comments to Authors)**

**Point 01** “So far, this is the first report of rapid proliferation of lens epithelial cells followed by asymmetrical multifocal IOL insertion and recovery after capsule polishing combined with IOL rotation.” How are the authors aware of that? Have they looked into the literature?

**Point 02** “We speculated the reasons for deterioration of postoperative visual quality such as postoperative inflammation which could lead to proliferation of lens epithelial cells and migration to the anterior surface of IOL, even lead to corneal endothelium edema and opacity of refractive media.” The authors need to refer to the literature in order to back up these speculations. Therefore, some references will needed for this sentence.

**Point 03** There is some repetition of the results in the Discussion, without a discussion per se. Example: “At a one-year follow-up, visual quality was assessed using OPD Scan III (Nidek Inc., Tokyo, Japan), the tilt was acceptable in both horizontal and vertical directions without adversely affecting visual quality. At the same time, the lens position was also positive with no obvious tilt when viewed using ultrasound biomicroscopy (UBM).”

**Point 04** The authors should draw a clear conclusion at the end of the discussion.

**Response to Reviewer #1:**

We are very grateful to your comments for the manuscript. According to your advice, we amended the relevant part in manuscript. All of your questions were answered one-by-one.

**Point 01**

We have looked into the literature and there were no reports of vision recovery after capsule polishing combined with IOL rotation. We found a case about an asymmetric multifocal intraocular lens rotation (SBL-3, Lenstec, Inc), The reason for the rotation operation is pupil shift. in this case, Moore et al<sup>[1]</sup> demonstrated that rotation of the asymmetric IOL can be used to both recenter the IOL and increasethe required surface area of either distance or nearcomponent within the physiological pupil thereby optimizing visual outcomes. Although they rotated the lens, but for a completely different reason, which was ruled out in our case.

[1] Pazo EE, Richoz O, McNeely R, Millar ZA, Moore TC, Moore JE. Optimized Visual Outcome After Asymmetrical Multifocal IOL Rotation. J Refract Surg 2016;32(7):494-496[PMID: 27400082 DOI:10.3928/1081597X-20160503-01]

**Point 02**

We have looked into the literature, for the unique functional and structural characteristics of glaucoma patients, which lead to an increased risk of posterior capsule opacification, inflammation, and anterior capsular opacification, which was supplemented in our case. In addition, the proliferation of lens epithelial cells were most pronounced over the surface of the IOL, and the inflammatory reaction was very obvious, so we made such a conjecture.

**Point 03**

We couldn't agree more with you, therefore, we deleted this part in the discussion section and included it in the patient's follow-up results as evidence that the lens did not have any tilt that

affected the visual quality.

**Point 04**

According to your reminder and suggestion, we have added the following conclusions in the case: The postoperative inflammatory reaction and lens epithelial cells proliferation were obvious in this glaucoma patient. Capsule polishing and rotation of the lens were beneficial to the patient, which not only enhanced the patient's vision, but also improved the patient's satisfaction. Glaucoma patients need to be cautious of implanting multifocal IOLs. Placement of a near segment of an asymmetrical multifocal IOL in the dominant eye should be performed on an individual basis. Although cataract surgery for glaucoma patients may be challenging, it affords an opportunity to dramatically improve the quality of life of patients.

Thank you and all the reviewers for the kind advice again. Please let me know if you have any questions. Looking forward to hearing from you. Thank you and best regards.

Yours sincerely,  
Jian Jiang