

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Ophthalmology

ESPS manuscript NO: 9347

Title: Cumulative Probability and Risk Analysis for Nd:YAG Laser Capsulotomy

Reviewer code: 00730669

Science editor: Xiu-Xia Song

Date sent for review: 2014-02-10 14:12

Date reviewed: 2014-02-11 09:18

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input checked="" type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input checked="" type="checkbox"/> Major revision

COMMENTS TO AUTHORS

I think this study doesn't have novelty of the research. The risk factors such as young age and IOL edge is well known for increasing PCO rate. And as you mentioned, the comment, which is "The capsulotomy rate was higher if patients had phacoemulsification by more experienced surgeons." is wrong, because I also think it caused by bias. So if you want to know the difference of PCO rate according to surgeon's skill, you should select patients which have similar lens condition.

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Ophthalmology

ESPS manuscript NO: 9347

Title: Cumulative Probability and Risk Analysis for Nd:YAG Laser Capsulotomy

Reviewer code: 00505064

Science editor: Xiu-Xia Song

Date sent for review: 2014-02-10 14:12

Date reviewed: 2014-02-12 18:19

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input checked="" type="checkbox"/> Grade A: Priority publishing	Google Search:	<input type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

1. Why was IOL placed in sulcus after an uneventful phacoemulsification? 2. Did the authors perform multi variate analysis to see if increasing experience was associated with increased capsulotomy risk? 3. Diabetes has been known to be associated with increased risk of PCO. what did the authors find in their data? 4. What is the indication of capsulotomy in the author's centre? is it performed in every case of PCO or is there a specific grade for the same?

ESPS PEER REVIEW REPORT

Name of journal: World Journal of Ophthalmology

ESPS manuscript NO: 9347

Title: Cumulative Probability and Risk Analysis for Nd:YAG Laser Capsulotomy

Reviewer code: 00505139

Science editor: Xiu-Xia Song

Date sent for review: 2014-02-10 14:12

Date reviewed: 2014-02-25 04:59

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input type="checkbox"/> Grade A: Excellent	<input type="checkbox"/> Grade A: Priority publishing	Google Search:	<input checked="" type="checkbox"/> Accept
<input type="checkbox"/> Grade B: Very good	<input checked="" type="checkbox"/> Grade B: Minor language polishing	<input type="checkbox"/> Existing	<input type="checkbox"/> High priority for publication
<input checked="" type="checkbox"/> Grade C: Good	<input type="checkbox"/> Grade C: A great deal of language polishing	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D: Fair	<input type="checkbox"/> Grade D: Rejected	<input type="checkbox"/> Existing	<input type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E: Poor		<input type="checkbox"/> No records	<input type="checkbox"/> Major revision

COMMENTS TO AUTHORS

This is a nice and well presented manuscript of posterior capsular opacification cumulative risk. Few typographical changes need to be performed to be considered for publication: Meta-analysis or meta anaysis instead metaanalysis. In introduction: adrenergics instead adrenergica. Please unify the hyphenated or unhyphenated forms of follow-up.