

## ANSWERING REVIEWERS

**Name of Journal:** *World Journal of Clinical Pediatrics*

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*Retrospective Study*

**Clinical profile and outcomes of pediatric endogenous endophthalmitis: A report of 11 cases from South India**

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**Reviewer's code:** 00505049

Only two comments for authors to revise:

1. Table 1, Follow up time should be marked "months"

Answer: "months" marked in follow up in Table 1

2. Table 1, Final outcome should write "Phthisis bulbi" not only Phthisis.

Answer: Phthisis changed to "phthisis bulbi" in Table 1.

**Reviewer's code:** 00505209

I consider this study to have valuable data that would be of interest if published. Since this endogenous endophthalmitis is a very rare disease this paper is a very useful contribution into the field of pediatric ophthalmology. So I commend it for publication without changes.

Answer: Nil changes.

**Reviewer's code:** 00505045

The authors submitted paediatric cases with endogenous endophthalmitis. It is well written. Language is good except very few spelling errors. Organisation of table is good. Misdiagnosis of five cases by other doctors may be defined as undiagnosed or "could not be diagnosed correctly" I congratulate the authors for collecting these cases of endogenous endophthalmitis in paediatric age which are seen very rarely.

Answer: Spelling errors corrected and 'misdiagnosed' changes to 'undiagnosed' and 'wrong diagnosis'

**Reviewer's code:** 00505087

The study is a fair attempt to record all cases of endogenous endophthalmitis in children at a tertiary care centre. It is well written and comprehensive. However some points need to be corrected in order it can be considered for publication. In particular:

1. The results section in the abstract should have less content and only core information.

Answer: Content in the result section in the abstract reduced.

2. The authors should define what they call a good result

Answer: Definition of good result added as last line in methods section of the manuscript.

3. Do the authors have any measurement of the visual acuity in children?

Answer: Final visual acuity of 7 eyes mentioned in last line of results section of manuscript.

4. How do the authors define endophthalmitis? Did they discriminate endogenous endophthalmitis from chorioretinitis?

Answer: Endophthalmitis is defined as inflammation of the inner coats of the eye. It may start as subtle chorio retinal abscesses with minimal inflammation or present as frank infection with the entire vitreous cavity and the inner coats of the eye filled with pus. Case no. 5 presented only with chorio retinal abscesses with active knee arthritis. A very close follow up was maintained, and luckily it resolved only with systemic antibiotics. Hence in a setting of frank infection somewhere else in the body, chorio retinitis is taken as early endophthalmitis.

5. Some more pictures of other cases are encouraged to be included.

Answer: Unfortunately we do not have the clinical pictures of other cases.

6. The authors should move all of their results to the appropriate section and not in the materials and methods section

Answer: All results moved from material and methods section to the results section.