

ESPS Peer-review Report

Name of Journal: World Journal of Meta-Analysis

Ms: 2187

Title: Ophthalmic adverse drug reactions - a nationwide detection using hospital databases

Reviewer code: 00183661

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-02-06 09:33

Date reviewed: 2013-02-26 01:11

CLASSIFICATION	LANGUAGE EVALUATION	RECOMMENDATION	CONCLUSION
<input checked="" 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"/> Existed	<input type="checkbox"/> High priority for publication
<input type="checkbox"/> Grade C (Good)	<input type="checkbox"/> Grade C: a great deal of	<input type="checkbox"/> No records	<input type="checkbox"/> Rejection
<input type="checkbox"/> Grade D (Fair)	language polishing	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)	<input type="checkbox"/> Grade D: rejected	<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

This is a well written article reporting the adverse effects of ophthalmic drugs. The methods are well described, and the results are easy to understand. I have just one query which I would like the authors to address: Would it be possible to report by frequency, the most common ophthalmic drugs for which such adverse reactions have been reported?

ESPS Peer-review Report

Name of Journal: World Journal of Meta-Analysis

Ms: 2187

Title: Ophthalmic adverse drug reactions - a nationwide detection using hospital databases

Reviewer code: 02459246

Science editor: Zhai, Huan-Huan

Date sent for review: 2013-02-06 09:33

Date reviewed: 2013-03-08 20:27

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"/> Existed	<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	BPG Search:	<input checked="" type="checkbox"/> Minor revision
<input type="checkbox"/> Grade E (Poor)		<input type="checkbox"/> Existed	<input type="checkbox"/> Major revision
		<input type="checkbox"/> No records	

COMMENTS TO AUTHORS

Comments to the Author This paper addresses an important topic. I have some comments and issues to address. Comments: Abstract: In summary, abstract is good and easy to understand. Additional details for material and methods are needed, for example, definition and assessment of ADR are either from WHO or Naranjo algorithm, which would be helpful. The objective of the study should be clearly stated, e.g. ADR detection, etc. Introduction: this section should providing some evidence of the importance and the advantage for using this methodology (e.g. detection rate, report quality or risk of bias) Method: Definition of ADR: Add details about "term of side effect", that including in the result of this study or not Detection of ADR: Should be explaining how to perform the causality assessments of ADR (Naranjo's algorithm) for example all ADRs were assessed independently by 2 reviewers. Differences were resolved by consensus. A third review was consulted to help resolved differences. Result: Additional details would be helpful, for example, Classes of Ophthalmic Medications, dose and duration and severity of ADRs The result did not shown some secondary outcome that the author mentioned (e.g. ADR in inpatient, ADR in out patients ADR related to admission versus ADR during hospitalization) Other: In abstract and discussion, the interpretation of 4 person-hours should be explained.