Reviewer's report

Title: Is enucleation a risk factor for the development of cluster headache?

Version: 1 Date: 5 November 2004

Reviewer: Philip L Custer

Reviewer's report:

General
It is important to differentiate between the different procedures that may involve removal of some or all of the ocular-orbital contents. In evisceration, the ocular contents are removed. The entire eye is resected in the enucleation procedure, while exenteration involves the partial or complete removal of the orbital contents. Evisceration and enucleation generally would not be greatly disruptive to the intraorbital III, IV, V, VI neural structures, while these nerves would often be transected in exenteration. The authors refer to references 16 and 17 on several occasions. These papers presumably involve cluster headache after exenteration, a fact which should receive more emphasis, since the patients included in this report all underwent the much less traumatic procedures of enucleation and evisceration. Nonetheless, this report is significant in showing there is a very low incidence of cluster headache after enucleation. My clinical experience in over 250 enucleation procedures would confirm this conclusion.

Major Compulsory Revisions (that the author must respond to before a decision on publication can be reached)

Minor Essential Revisions (such as missing labels on figures, or the wrong use of a term, which the author can be trusted to correct)

Discretionary Revisions (which the author can choose to ignore)

What next?: Accept after discretionary revisions

Level of interest: An article whose findings are important to those with closely related research interests

Quality of written English: Acceptable

Statistical review: No

Declaration of competing interests:
I have no competing interests