Author's response to reviews

Title: Results at seven years after the use of Intracameral cefalozin as a prophylaxis of endophthalmitis in cataract surgery

Authors:

Pedro Romero-Aroca (romeropere@gmail.com)
Isabel Mendez-Marin (imendez@grupsagessa.com)
Merce Salvat-Serra (msalvats@grupsagessa.com)
Joan Fernandez-Ballart (jfernandez@grupsagessa.com)
Matias Almena-Garcia (malmenag@hotmail.com)
Javier Torres-Reyes (jtorres@grupsagessa.com)

Version: 4 Date: 9 November 2011

Author's response to reviews: see over
Dear Editor

Sabina Alam, PhD
Senior Executive Editor
BMC series journals

I send you the responses to reviewers of the manuscript: MS: 8908345295083521

Entitled: “Results at seven years after the use of Intracameral cefalozine as a prophylaxis of endophthalmitis in cataract surgery”

Authors: “Pedro Romero, Isabel Mendez, Merce Salvat, Joan Fernandez-Ballart, Matias Almena and Javier Torres-Reyes”

The new version include all changes suggested by the reviewers

The new version has been revised by an expert native English corrector of the University Rovira & Virgili (Prof. Phil Hoddy is an expert corrector of English medical scientific papers an assistant of the Institut de Investigacions sanitaries Pere i Virgili IISPV)

Prof. Pedro Romero-Aroca
Responses to reviewer 1

**Thank you for the comments on our manuscript.**

1. Page 1, under key words “cefazolin” is misspelled as “cefazoline.”

   The new version has been revised by an expert native English corrector of the University Rovira i Virgili, and the term cefazoline has been eliminated.

c. In the abstract, under Results: “The relative risk (RR) for endophthalmitis in Group 1 against group 2 was 11.45 95% CI 5.72-22.84, p<0.001.” is one long sentence that needs separation. For example, it should be “The relative risk (RR) for endophthalmitis in Group 1 against group 2 was 11.45 [95% CI 5.72-22.84] (p<0.001).”

   The paragraph has been changed according your comments.

3. d. Consider changing the Conclusion of the abstract

   The final version includes a new conclusion in the abstract: “Conclusions: An intracameral bolus injection of cefazolin (1mg in 0.1 ml solution) at the conclusion of the cataract surgery significantly reduced the rate of postoperative endophthalmitis”

4. There are still numerous grammatical errors in the manuscript and spelling errors in the references (even those referenced in the response letter). Please be sure to revise the manuscript to the English standard of written journal articles.

   The new version has been revised by an expert native English corrector of the University Rovira i Virgili.

5. There is still a lack of discussion regarding why the rate of endophthalmitis for group 1 is so high at 0.63%. Most published reports has the rate at 0.1% or less. Although the authors provided an explanation and referenced published papers regarding the high rate of endophthalmitis in the response letter to the editor, this discussion needs to be in the manuscript and include the references reporting the high rate of postoperative endophthalmitis.

   The new version include a new paragraph: 

   In our district Health care Area we had a high level of endophthalmitis previously the intracameral uses of antibiotics, as we appointed in the present study in group 1, we can to observe that the incidence of endophthalmitis had a rate of 0.649%, this value is higher that the published in the literature in other countries (2,6, 8,14), but the incidence in Spain was also higher as other study groups of our country previously demonstrated, thus in the Madrid health care area, Garcia-Saenz et al (19) found an incidence of 0.59% (95% CI, 0.50%-0.70%) between January 1999 and September 2005, furthermore Garat et al show an incidence of 0.422% (95% CI 0.279-0.613) and those studies (12,13). Because our center had an excessive number of endophthalmitis cases, despite using all means of regular prophylaxis (a sterile ophthalmology operating room, povidone-iodine in skin (at 10%) and
conjunctival sac (at 5%) with few surgical intraoperative complications etc.), we decided the use of intracameral antibiotics after cataract surgery.

Responses to reviewer 2

Responses to Major Compulsory Revisions.

Thanks for your invaluable help. All errors have been corrected in the new version.

1. There are some spelling missing in methods of Abstract?.

The new version has been revised by an expert native English corrector of the University Rovira i Virgili.

2. The 3rd paragraph of Introduction is confused. “Our group uses a concentration of 1 mg in 0.1 ml for two years, and then we inject 2.50 mg/ml intracameral, similar to Garat et al (12), and we obtained excellent results, supporting the use of cefuroxime.”....... The paragraph has been eliminated in the new version, it is a error its inclusion in the previous version.

3. There are errors in Results. “Demographic results in the two groups of patients

The paragraph has been changed in the new version:

“ Group 1 (11,696 patients) operated on between January 1996 and December 2002, Group 2 (13,305 patients) between January 2003 and December 2009 (in whom a 1mg/0.1 bolus of intracameral cefazolin was instilled).”