Reviewer's report

**Title:** Effectiveness of intravitreal ranibizumab in exudative age-related macular degeneration (AMD): comparison between typical neovascular AMD and polypoidal choroidal vasculopathy over a 1 year follow-up.

**Version:** 3 **Date:** 28 November 2012

**Reviewer:** Michael Stewart

**Reviewer's report:**

1. What do the authors mean by “typical AMD”? I assume that it refers to occult, classic and RAP lesions. Please specify. Also please provide information about the relative frequencies of each of these lesions in the tAMD group.

2. Abstract, Results: rather than saying "repeated measures ANOVA over 12 months" please say that the difference was significant at each time point, or give the p-values for each time point during the year.

3. Abstract, Conclusion: I don't know what the authors mean by the first sentence. Please re-write.

4. Introduction, first sentence: actually bevacizumab is the drug of first choice for most retina surgeons - according to US Medicare utilization and ASRS PAT survey. Please amend this sentence.

5. Introduction: the MARINA and ANCHOR treated patients monthly. They did not provide any evidence regarding the importance of 3 loading doses.

6. How were the 54 patients identified? Were these ALL the patients seen during the time period that satisfied the entry criteria?

7. Page 8: should read "...3 consecutive monthly injections..."

8. Was visual improvement in the tAMD group statistically better than the PCV group at each time point?

9. The number of retreatments (0.9, 1.2) is very small compared to trials such as CATT. How do the authors explain this?

11. The authors need to take care when comparing visual improvements between the 2 groups. Though the improvements were statistically greater in tAMD patients, these patients started and finished with worse visions than those with PCV. Though the groups were not statistically different at baseline (p=0.09) they were very close. Therefore, one could argue that tAMD patients improved more because they started with worse vision. Poorer vision is known to correlate with greater improvement. The authors need to address this in their Discussion and state that further studies with more patients and better matched groups are important.

The authors report the use of ranibizumab for the treatment of typical AMD and PCV. They state that greater visual gains were achieved in the tAMD group.
However, the groups were poorly matched at baseline, thus calling into question the accuracy of their conclusion. I think that this manuscript can be accepted for publication but with low priority and after addressing the problems I have outlined above.

**Level of interest:** An article of limited interest

**Quality of written English:** Acceptable

**Statistical review:** No, the manuscript does not need to be seen by a statistician.

**Declaration of competing interests:**

I declare that I have no competing interests