Author's response to reviews

Title: Evaluation of the vitreous microbial contamination rate in office-based three-port microincision vitrectomy surgery using Retrector technology

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Evaluation of the vitreous microbial contamination rate in office-based three-port microincision vitrectomy surgery using Retractor technology

Responses to Reviewers’ comments

Responses:
We would like to take this opportunity to thank the reviewers for their thorough and constructive comments and encouragement to our paper. Our detailed responses to the comments are as follows.

Reviewers’ comments:

Reviewer #1:
Minor essential revisions:

1. “Discussion” section, please change to “Egger et al.”

Response:
This has been changed accordingly.

2. “missed during collection.” This statement refers to false negative rates of intraoperative cultures. It may be that they were “missed during collection” or that the culture itself was not sensitive enough.

Response:
This has been changed and modified to: “…may have been missed during collection or that the culture method was not sensitive enough to detect the minute amount of organisms.”

3. “better wound closure at the end” should read “better conjunctival wound closure at the end” since the authors state that none of the scleral wounds were sutured.

Response:
This has been changed accordingly.

4. “Conclusion” section
“the risks of vitreous bacterial contamination rarely arises during the set-up and
process of the surgery.” May be more appropriate to substitute “rarely arises” with “is low” (or something similar) so that the conclusion is more in line with the results in this relatively small study given the limitations of the assay (as the authors acknowledge, there may be false negatives where a small bacterial load does not yield a positive culture)

**Response:**
This has been modified as suggested by the reviewer.

**Discretionary revisions:**

1. “Patients and methods” under vitrectomy subheading, paragraph 1: Consider “the surgeon was gloved and masked but not gowned”.

   **Response:**
   This has been modified as suggested by the reviewer.

2. Re: “None of the sclerotomies needed to be sutured.” Consider mentioning if there were any cases of postoperative hypotony. Would defer to authors. They already do address the rate of postop choroidal detachment.

   **Response:**
   Thank you for this pertinent suggestion. Indeed, only one patient from the cohort experienced transient hypotony after the procedure. This self-resolved by itself permanently from POW1 onward. The manuscript now makes mention of this case at the end of the section “Results”.

   3. “a relatively low number of bacterial detection rates” may sound better if worded “a relatively low bacterial detection rate”

   **Response:**
   This has been modified as suggested by the reviewer.