Author’s response to reviews

Title: Does a small central Nd:YAG posterior capsulotomy improve peripheral fundal visualisation for the Vitreoretinal surgeon?

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Dear Editor,

We would like to submit the following revised manuscript for consideration of publication in BMC Ophthalmology. We would like to justify the changes made based on the reviewers comments that we received.

Comment 1:
Only one examiner scored the fundus visualisation score. The authors should confirm interobserver repeatability of their method.

Whilst we agree with the reviewer that if we were going to apply this technique of fundus visualisation scores across a broader study with more than one observer making the assessments, then interobserver repeatability would be an important attribute to confirm, we emphasise that in this study, all assessments were performed only by one observer (NP). Therefore, interobserver repeatability was not assessed. We do not claim that this technique can now be used in other studies, based on the reliability data that we provide; merely, we state that for the purposes of this study, were only one observer made the fundal visualisation score assessments, good intraobserver repeatability was demonstrated and therefore this technique is reliable in this study’s setting only. We state in the discussion "Inter-rater variability was not assessed in this study, as all examinations were carried out by the same examiner."

Comment 2: The authors had better clarify the size of the capsulotomy performed.

We agree with the reviewer. Therefore the manuscript has been amended as follows:

"Treatments were performed to produce small central capsulotomies of size approximately 2-3mm diameter, in keeping with previously published research by the authors"


Following these amendments, we would be very grateful if you would consider this article for publication in BMC Ophthalmology.

Kind Regards,

Niall Patton, Tariq Aslam, Baljean Dhillon, Harry Bennett.