Reviewer’s report

Title: Postoperative IOP prophylaxis practice following uncomplicated cataract surgery: a UK-wide consultant survey

Version: 3  Date: 28 June 2005

Reviewer: Clemens Vass

Reviewer’s report:

General
Most of my objections have been addressed by the revised version of the manuscript. There are only a few remaining points.

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

1) (1st review, comment 4) Discussion (paragraph 3, lines 3...) "Only 10.9% of our responders check IOP on the day of surgery. This eliminates the need of hospital visit on first post-op day ..." This sentence has been changed, but the problem remains: The fact that only 10% measure the IOP on the day of surgery CANNOT be an argument that this eliminates the need of hospital visit on first postop day!! The fact that something is actually not done cannot eliminate the need, but indicates that NO FREQUENT AND SEVERE complications have been NOTED. This reflects the relatively low frequency of severe IOP elevation 1 day postoperatively, the self limiting nature of IOP spikes and the tolerance of a healthy eye. This paragraph has to be changed accordingly.

2) Discussion: "There may be fluctuations in the IOP levels ..... related to IOP rise is questionable": this infers that this is unlikely, but in fact this is only unproven and, as the authors state, very likely unprovable. There are no data to speculate on the likelihood of a risk reduction from e.g. 0.2% to 0.1%. The wording has to be neutral in this point, e.g. "... is unproven"

3) Conclusions (1st review comment 9): While it is true that the authors can only evaluate the responses it is still inappropriate to point in the conclusion to the striking similarity between the 2 groups with respect to the basis of their prophylaxis and ignore in this section the even more striking difference in non-responders to this question! Following the sentence "...practice is evidence based." a sentence has to be included addressing the difference in non-responders. (The same holds true for the abstract).

The author must respond to these before a decision on publication can be reached. For example, additional necessary experiments or controls, statistical mistakes, errors in interpretation.
- accept after points 1 - 3 have been addressed

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 minor essential revisions

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

**Quality of written English:** Acceptable

**Statistical review:** No

**Declaration of competing interests:**

Reimbursements for educational presentations from the following pharmaceutical companies: Alcon, Allergan, MSD, Pfizer