Reviewer’s report

Title: Eye care utilization patterns in Tehran population: a population based cross-sectional study

Version: 1 Date: 28 July 2005

Reviewer: Alan Robin

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General
This is an important and well-written manuscript dealing with the utilization of eye care in Tehran based upon information obtained in a prior study. I would like to make some suggestions that might improve the manuscript.

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

It would be nice if the authors could elaborate on the basic demographic features of the population studied: such as mean and median educational level, occupations, etc.

Most prevalence studies deal with older individuals. The authors should acknowledge this in both the methods and the discussion sections.

The last sentence in the results section of the abstract on page two is awkward and might best be rephrased.

The authors do not mention whether perimetry was routinely done. If it was not, how was glaucoma diagnosed?

It would be helpful if the authors discussed the utilization rate for each type of major eye disorder: that is, how many with glaucoma had previously obtained eye care, how many with a history of eye trauma had utilized care, etc.?

On page 5, the authors state that among those with visual impairment, 42% had no history of a prior eye examination. Yet, we do not know what percentage of those without visual impairment had no prior eye examination.

On page 6, why were ethnicity, religion, and marital status removed from the logistic model?

Was there a difference in utilization among those with various levels of either unilateral or bilateral vision loss or blindness?

Can the authors describe the cost of health care in Tehran? How many are insured? How much does an eye examination cost compared to the mean income?

What do the authors mean by “similar negative history” on page 6, line 13?

The sentence on page 13 including “while the reverse was true among those” might be rewritten to clarify the issues.
What do the authors mean by “acre” on page 6, 3 lines from the bottom?

The authors might choose to reword “rates of a negative history with an increasing age” as I am not sure what they mean on page 7, lines 12 to 13.

On page seven, bottom paragraph, other reasons for a decrease in utilization associated with less education may also mean that less educated individuals had lower salaries and might least be able to miss a day’s work to have an eye examination.

It might be nice to define the relative roles and responsibilities that both optometrists and ophthalmologists have in the Tehran community, as these vary from locale to locale and may not be implicitly understood.

According to table 1, this prevalence study has one of the youngest populations of any published study. The high percent of presenting visual disability is important to note in this young population. The authors might want to break down in a table the reasons for disability.

What is the number of ophthalmologists and optometrists per 1,000 people in this area? Is eye care readily available to most? What does it cost? Is free eye care available and is this free eye care marketed? Are most individuals aware of eye care providers?

Do the authors know what percent of individuals who were previously diagnosed with a potential visually disabling disease returned for visits?

If the authors included all ages, they had one year olds (page 4, third line of the results section). It would not be appropriate to ask a young child, under 5, if he or she had been to an eye doctor in the last 5 years.

Have the authors looked at utilization of those with visual acuity worse than 20/40 OU or worse than 20/200 OU?
**What next?:** Accept after minor essential revisions

**Level of interest:** An article of importance in its field

**Quality of written English:** Acceptable

**Statistical review:** No

**Declaration of competing interests:**
I declare that I have no competing interests