Author's response to reviews

Title: Acute myopia and angle closure glaucoma from topiramate in a child: a rare case report and review of the literature

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Author's response to reviews: see over
Dear Dr. O'Donovan,

Please find enclosed our manuscript, “Acute myopia and angle closure glaucoma from topiramate in a child: a case report” by Rapoport, et al., which we have revised and edited. Below is a point-by-point response to the concerns submitted by the reviewers:

**Reviewer: Saurabh Jain**
- According to the history, there was a lag period between the child being seen by the optometrist and the ophthalmologist. Given the acute presentation of myopia, I wondered why they were not sent to the hospital earlier.
- Acute myopia is not an altogether unusual presentation to an optometrist and generally a new myopia patient doesn't cause alarm – unless in the rare setting of acute angle closure glaucoma from a medication toxicity or from ciliochoroidal effusions.
- Could the authors clarify which method was used to measure intraocular pressure?
  - It was measured by tonometry using a portable tonopen.
- The vision is measured at 20 feet, 14 inches and 2 inches (on the first occasion). Is it usual to report the visual acuity as dememt results in this manner?
  - In a complete ophthalmologic examination, vision is typically tested at distance (20 feet) and at near (14 inches). In this patient’s case, vision was also checked at 2 inches because anteriorization of the lens leading to acute myopia was suspected.

**Reviewer: Joern Soltau**
- mg, kg, mmHg are accepted international units and do not need any explanation
  - Noted and revised
- I would recommend using the English terms right eye, left eye, both eyes, at bedtime, three times daily, by min both eyes or orally
  - Noted and revised
- The abbreviations VA, IOP, and PO are not properly explained/introduced
  - The first time they are introduced the abbreviations are explained for VA (visual acuity) and IOP (intraocular pressure). PO has been replaced by orally throughout.
- It is not clear if the discharge medications are given orally or topically
  - Some were given orally and some topically. This was revised for clarity.
- -3.75 diopters
  - Unclear what is being asked here.

We affirm that the manuscript is being submitted only to *BMC Pediatrics*, has not been published elsewhere, that it will not be submitted elsewhere while under consideration, and, should it be published in *BMC Pediatrics*, that it will not be published elsewhere. We declare that all authors are responsible for the reported manuscript and participated in the concept and design, drafting and revision. All authors have approved the manuscript and agree with its submission to *BMC Pediatrics*.

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We look forward to hearing from you at your earliest convenience.
With our best regards,

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