Reviewer's report

Title: Intraocular lens dislocation and tube shunt in the posterior chamber

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Reviewer: Sirisha Senthil

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Comments:

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It is an interesting case and well managed.

1. Discretionary revisions and minor revisions:
Grammatical error corrections all through the article would help the read the manuscript better.

2. Abstract conclusion: Lines 43-45: A posterior vitrectomy is completely required in cases with intraocular lens and capsular bag repositioning in eyes with a valve shunt and a tube in the posterior chamber.

Would read better if it is “A complete pars plana vitrectomy may be required while repositioning the dislocated IOL bag complex, in the presence of a posterior chamber drainage tube implant”.

3. Case presentation: Although the reason for new vessels and NVG is mentioned in the summary, the same is not mentioned in the case presentation. Would be good to add this before talking about intravitreal injections. (line 72)

4. Case presentation, second para: Line 88, it is mentioned as tube was placed behind the IOL and the IOP was 40 mm Hg. However, the reason for rise in IOP, the tube block with vitreous???? or tube tiip apposed to the capsular bag with obstruction??? Is not clear.

This could be important to plan the intervention. In a case with minimal support for the sulcus tube and the possibility of a recurrence, pars plana vitrectomy (could be sutureless) with pars plana tube positioning would be an alternative.

Level of interest: An article of limited interest

Quality of written English: Needs some language corrections before being published

Statistical review: No, the manuscript does not need to be seen by a statistician.

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