Reviewer's report

**Title:** Visual signs and symptoms in patients with the visual variant of Alzheimer disease.

**Version:** 1  
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**Reviewer:** Eleni Papageorgiou

**Reviewer's report:**

This is an interesting, well-written retrospective study (10 patients) on the visual symptoms of the visual variant of Alzheimer disease (posterior cortical atrophy). The aim of the study is clear and the results are presented in a comprehensive manner with an appropriate number of figures and tables. I agree with the authors, that the ophthalmologists should become familiar with this entity, as diagnostic methods are improving and we are likely to encounter it more frequently in the future.

**Major Compulsory Revisions**

1. Did any of the patients have visual neglect or visual extinction? Was is assessed during the formal neuropsychological testing? It is important to mention this, as it can co-exist with a hemianopia and is frequent in VVAD. Do the authors want (in the Discussion) to suggest a simple test for neglect for the ophthalmologist, such as letter cancellation or the Bells test?

2. Could the authors please specify the perimetric test used also in the text (as seen in fig. 2)? i.e. monocular, 30 degree automated static perimetry?

3. I understand that reading was assessed both by the ophthalmologist and by the neuropsychologist. Could the authors please mention the details in Methods? What did the ophthalmologist test? Was the patient instructed to write down a specific / standardized (?) sentence? Which (I assume standardized) test was used during the formal neuropsychological testing and how exactly was impaired reading ability defined? As words/min? As total errors? The reader would be interested in more detailed information regarding the methods used for assessment of reading ability, as reading problems were the main concern of this series of patients.

4. Apart from the "cookie theft picture", the Navon figures is another simple screening test for simultanagnosia, which could be used by the ophthalmologist, and could be mentioned by the authors in the Discussion.

5. Another form of visual field defect that may be encountered in VVAD is concentric constriction (Pelak et al., Neurology 2011).

6. The authors mention that: "Using a finger to trace the path on Ishihara color plates could help separating simultanagnosia from dyschromatopsia in VVAD patients". Did they perform this simple procedure to all their patients? Could they
report the result? How many of them with impaired Ishihara testing were unable to trace the letters on Ishihara?

Minor Essential Revisions
In the abstract it is mentioned that "preserved color identification with abnormal color vision on Ishihara (simultanagnosia)"....I would suggest removing simultanagnosia from the parentheses and inserting it as a separate disorder, because the reader may get confused. I totally agree that simultanagnosia might be the underlying mechanism for the color disorders found on Ishihara, but the way it is written in the Abstract could be confusing.

Level of interest: An article of importance in its field

Quality of written English: Acceptable

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