Author’s response to reviews

Title: Acute uveal effusion during phacoemulsification with preoperative central serous chorioretinopathy: a case report

Authors:
Ruiqi Chang (changruiqi@163.com)
Yu Du (joycedu624@163.com)
Peng Zhou (drzhoupeng@gmail.com)
Yi Lu (luyieent@163.com)
Xiangjia Zhu (zhuxiangjia1982@126.com)

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Author’s response to reviews:

Dear Editor,

We respectfully submit our manuscript entitled "Acute uveal effusion during phacoemulsification with preoperative central serous chorioretinopathy: a case report." for consideration for publication in BMC Ophthalmology. The paper was coauthored by Ruiqi Chang, Yu Du, Zhou Peng, Yi Lu, and Xiangjia Zhu.

Uveal effusion is the accumulation of fluid in the suprachoroidal layers with consecutive choroidal and retinal detachment, considered as a precursor of uveal hemorrhage and expulsive hemorrhage. With the modern cataract surgical techniques including small-incision, the incidence of uveal effusion has thus been significantly reduced. Acute uveal effusion during phacoemulsification has been rarely reported. Here, we reported an acute uveal effusion during clear corneal phacoemulsification using topical anesthesia in an eye with preoperative chronic central serous chorioretinopathy (CSC).

The patient with a history of chronic CSC for over 18 months presented with bilateral opacified lens. Preoperative ophthalmic examination showed CSC in the left eye, suspected lenticonus and
risky anatomies, including thick ciliary body, anteriorly rotated ciliary process and iris root in both eyes. During phacoemulsification, the anterior chamber flattened. With suspected infusion misdirection syndrome, anterior vitrectomy was rapidly performed followed by uneventfully accomplished operation. Postoperative ophthalmic examination including fundus photograph, type B ultrasound and optical coherence tomography confirmed the presence of uveal effusion. Our case report revealed a potential association between preoperative CSC and uveal effusion during surgery, considering the choroidal hyperperfusion and hyperpermeability in CSC eyes.

This work has not been submitted elsewhere for publication, in whole or in part, and all the authors have approved the manuscript as enclosed.

Thank you for your consideration.

Sincerely yours,
Xiangjia Zhu, M.D.
Department of Ophthalmology, Eye and Ear, Nose, and Throat Hospital of Fudan University, 83 Fenyang Road, Shanghai 200031, China
Email: zhuxiangjia1982@126.com

Author’s response to reviewers’ comments

Dear editors,

We greatly appreciate both your help and that of the reviewers concerning improvement to this paper. We cherish this opportunity to revise the manuscript and have tried our best to make the revisions.

Thank you.
Yours sincerely,
Xiangjia Zhu.

Response letter:

Q1. Thank you for providing a Consent for publication heading for the Declarations section. Please specify whether the patient provided written or verbal consent. If consent was not written then please seek written consent form the patient retroactively.

Response: We really appreciate your advice. The patient provided written consent to publish this case report. (Declarations section, line 1, paragraph 2, page 12).

Q2. Please rename figure timeline to figure 3, additionally please ensure that figure 3 is mentioned within the main text of the manuscript. As of now only figures 1 and 2 are mentioned.

Response: We really appreciate your advice. We have removed the figure 3, as it is not mentioned within the main text of the manuscript.