Author’s response to reviews

Title: Incidence of acute-onset endophthalmitis after separate bilateral cataract surgeries less than 5 days apart

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We wish to thank the reviewers for their time and expertise. We addressed all of the reviewers’ concerns below and we hope you find the manuscript suitable for publication.

The following is the reviewers’ comments and our responses

William R. Barlow, MD (Reviewer 1): This is an interesting concept to study. It is difficult to study due to the large number of patients needed to truly show a difference. I believe your paper would benefit from a control group of cases completed in the standard manner (1st eye and 2nd eye separated by longer period of time) at your center to better assess the specific impact of your current surgical methods of only a few days between surgeries compared to this method. This is an excellent and constructive suggestion and would undoubtedly enhance the present study. However, it is difficult to show a significant difference in the incidence of endophthalmitis between separate bilateral cataract surgeries that are between less than 5 days apart and a longer period of time. Even if the difference exists, due to the insufficient single-center cases and the low incidence of endophthalmitis as Dr. Barlow mentioned: “it is difficult to study due to the large number of patients needed to truly show a difference”, which is the reason that the present study is just descriptive. We plan to conduct a multi-center study and include more cases according to your suggestion in the future.

One specific deficiency noted is that you report vitreous loss of 2.4%. These cases would be at greater risk of endophthalmitis. There was no mention about whether these cases were excluded from the analysis or whether the cases with endophthalmitis were associated with this complication.

As Table 3 indicates, the cases with endophthalmitis were not complicated by vitreous loss. As indicated in the Methods section (lines 84-85): “the second eye surgery was canceled if a complication occurred in the first eye, such as communication with vitreous, significant corneal
edema, or refraction problems”, so the complication of vitreous loss reported in our manuscript occurred in the second eye and the cases with such complication were included in the analysis. The reason that there is no endophthalmitis in these cases with a greater risk may be because of the longer treatment time for topical antibiotics prophylaxis in the second operated eye.

Andrzej Grzybowski, MD, PhD, MBA (Reviewer 2): This is an interesting ms. I propose to change in Methods section (line 88) that lids ... were sterilized - to disinfect.

We have changed the sentence according to your suggestion.