Author’s response to reviews

Title: Epidemiology and Clinical Features of Viral Anterior Uveitis in Southern Taiwan—Diagnosis with Polymerase Chain Reaction

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Response to comments of the reviewers
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We highly appreciate the valuable comments and suggestions of the Editor, Dr. Ester Carreno, and both reviewers, Dr. David Diaz Valle and Dr. Alejandro Fonollosa Calduch. We found these comments and suggestions to be very useful in improving the manuscript and have responded to these in a point-by-point manner as follows.

Response to the comments of Reviewer #1:
We thank the reviewer for taking the time to review our manuscript and the valuable comments.

Response to the comments of Reviewer #2:

Q1. In the results section, from line 32 till the end of the section: it is hard to understand the meaning of what the authors are trying to explain. They have found " differences between patients with normal lens vs pseudophakic" for example. Differences in what? I suspect they have observed more CMV cases in pseudophakic patients... if this is so it should be better expressed.

A1. We thank the reviewer for this reminder. We have modified the description to “…we found a predominance of pseudophakic eyes in the CMV-positive group, as there was a significant difference between patients with normal lens versus pseudophakic eyes and patients with cataract versus
pseudophakic eye” (Results section, lines 16-17, page 9) for clarity.

Q2. The authors should discuss the possible etiologies for the PCR negative cases.
A2. We thank the reviewer for this reminder. Kongyai et al1 and Chee et al2 pointed out in their studies the possible attributes for the PCR negative results, including non viral disease causes and the rapid course of the acute ocular inflammation leading to elimination of viral DNA upon the aqueous humor tapping time. We have added this discussion in the revised manuscript (Discussion section, lines 39-42, page 11).

Ref.

Q3. It would be interesting to describe clinical differences between CMV and HSV and VZV cases.
A3. We thank the reviewer for the valuable suggestion. Under an appropriate patient size consideration in the CMV, HSV, and VZV groups, respectively, we would indeed take into account to see the clinical differences between CMV, HSV, and VZV cases in future studies. Therefore, we referred to the study conducted by Takase et al.1 on their findings of distinct clinical features between anterior uveitis patients infected with HSV, VZV or CMV. They found that VZV AU patients had severe aqueous flare and the highest viral load in the aqueous humor, while CMV AU patients had the mildest intraocular inflammation, lowest corneal endothelial cell density, and highest IOP. We have added these features in the revised manuscript (Introduction section, lines 25-31, page 4).

Ref.