Author’s response to reviews

Title: A 8-Year Retrospective Clinical Analysis Of 272 Patients Of Epidemic Keratoconjunctivitis In Beijing, China

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Author’s response to reviews:

Reviewer reports:

Yun Zhang (Reviewer 1): All 272 patients in this paper were sporadic cases over 8 years. It is a large scale. In this study, according to the severity of EKC all patients were classified into three grades this new clinical grading criterion has an important guiding value for clinical diagnosis and treatment.

Here are some questions:

1. In Conclusions: "The adult must be treated actively and timely because of the high risk of turning to the severe degree and the high incidence of corneal lesion."

But there were only 14 cases, 11 cases, and 24 cases in the other three groups. It is not enough to say they are less possible to turn to severer degree. This conclusion may be misleading viewers to think that it's not important to treat other groups.

Please modify this conclusion.

Thanks a lot for your precious advices. According to your opinions, modification has been made in the article. Here are the detailed description below:
According to the analysis of all the patients including acute and non-acute phase, the proportion of severe cases was the highest, which is 50.4%. Among the incidence of all typical signs, corneal involvement was the most common accounting for 69.8%. The MSI were distributed mostly in the central region of cornea, which is 90.7%. That means appropriate attention should be paid on EKC, because of the considerable proportion of severe cases, the high incidence of corneal lesion, and the high incidence of central region involvement of MSI, which can cause blurred vision temporarily or permanently.

Conclusions: Appropriate attention should be paid on EKC, because of the considerable proportion of severe cases, the high incidence of corneal lesion, and the high incidence of central region involvement of MSI.

Thanks again for your attention!

2. Please check for grammatical mistakes such as the instructions for Figure1 and 2.

The grammatical mistakes have been corrected in the instructions for Figure1. Figure 2 has been deleted.

Eric G Romanowski, MS (Reviewer 2): Editor's Comments

Major Revisions:

Data should not be duplicated in the text after it has been presented in Tables. The result should only be analyzed in the text if already presented in Tables. As an alternative, the tables could be deleted and the data only described in the text, but I prefer to see that data in the tables. Therefore all references of data in the text (that has already been presented in tables) should be deleted. This refers to the data in the text following all Tables 1-5. Data should never be duplicated in the text and in tables and/or figures.

Thank you for your opinions. According to your advices, all references of data in the text that has already been presented in tables have been deleted.

Delete Figure 2. This figure is incorrect as pie charts only have 100%. This data is described in the text.
Figure 2 has already been deleted.

After all descriptions of statistical analyses and statement of P values, include the statistical test used to determine the analysis, such as Chi-square, T-test, etc.

Data analysis of the study was performed using SPSS statistics 23 software (IBM Corp., Armonk, NY, USA). The incidence or the constituent ratio were assessed using Pearson chi-square tests and, if the number of cases in a subgroup analysis was too low, Fisher’s exact tests. A value of \( P < 0.05 \) was considered as statistically significant. The descriptions of statistical analyses were stated after the P values. The modification has been made in accordance with your opinion. Thanks.

Many references are in incorrect formats. References 1 and 10 are in an incorrect style. There is no journal listed for Reference 1. Furthermore, many of the references list the first and middle names of the authors and the first initial of the last name. This is obviously incorrect. I know this as I am the lead author of Reference 30. These style and author errors must be corrected.

I’m so sorry for my mistakes. These errors have be corrected.

Include page number on the manuscript to aid in review.

The page number has been added in the manuscript.

Discussion, second page, lines 25-31: It is stated "The data indicated 30.2% of patients were infected in winter, 29.9% in summer, 22.4% in autumn, and 17.5% in spring. Winter and summer was the high risk season of EKC." This statement should be backed up with statistics. These Statistics were not presented in the Results section. Present the statistical analysis for these comparisons in the Results section. Revise the text to read "Winter and summer were the high risk seasons for EKC" if the statistical analysis proves this point. If not, then remove this statement.

The Statistics were presented in the Results section. The inappropriate statement has been removed.

Minor Revisions:

Abstract Background, last word should be the plural form "criteria" not the singular form "criterion". This should also be revised in the Discussion.
Test Background, line 42: typo "samlpe" should be revised to read "sample".

Methods, Study Population, second page and other places in the manuscript: the adjective "pseudomembranous" must be revised to the noun "pseudomembranes".

Methods, General Information: Provide the ages of the four groups of patients, children, adolescents, adults, and the aged. These were listed in the results, but this is in text that should be deleted. It is a better approach to define the groups in the Methods.

Results, Clinical signs, third page, line 23: revise "Only one old people" to "Only on aged patient".

Discussion, first page, line 20: revise "adenovirstype" to "adenovirus-type".

Discussion, first page, line 26: the "I" in Involvement is not capitalized. Insert a space between the period and "The" at the beginning of that sentence.

Discussion: Confirm the names used when citing works used in the text are last names. Use only the last names and no initials.

Discussion, second page, line 17: "history" is misspelled. Also "red-eye people" should be "red-eye patients".

Discussion, third page, line 45: revise "an old people" to "an aged person".

Thank you for your patience. All the minor revisions have been made in the manuscript.