Reviewer’s report

Title: Effect of intraocular anti-VEGF on cystoid macular edema associated with Henoch- Schönlein purpura

Version: 0 Date: 16 Nov 2019

Reviewer: Burak Erden

Reviewer's report:

This is a remarkable case presentation reporting promising results of anti-VEGF "aflibercept" treatment results in Henoch Schönlein purpura associated macular edema but I believe some issues have to addressed.

First of all, the manuscript contains many English grammar errors and some expressions are hazy, I suggest a language editing by a native speaker or professionals.

The age and gender of the patient have to be mentioned also in the abstract.

The hypothetical indication of intravitreal anti-VEGF is well discussed in the discussion section, but I have some doubts of bilateral injections at the same day, this is generally not welcomed due to the injection related risks. The reason of bilateral injections on the same day has to be addressed.

Many physicians would prefer intravenous 1mg/kg prednisolone as the systemic corticosteroid therapy in acute attacks, the authors preferred instead of prednisolone 10 mg dexamethasone, could you justify the reason of it?

The clinical presentation of bilateral extensive retinal hemorrhages and severe cystoid macular edema with serous retinal detachments are all signs of an acute attack most probably arterial hypertension or hematological disorders, but the authors mention that the blood pressure and laboratory findings such as blood cell count, coagulation profile, and liver and kidney parameters were normal. The only etiological factor for this clinical presentation - according to the authors - is the hypothetical elevation of intravitreal and intraretinal VEGF levels.

A possible scenario among others could be e.g. easily a transient hypertensive attack before patient's ophthalmological examinations. Did you question a history of any severe physical exercise or trauma elevating the intra-abdominal pressure? In short, how do you explain the fundus findings at his initial presentation?

Did you perform any cranial imaging to rule out intracranial pathologies or elevated BSF pressure before starting the high dose systemic corticosteroid therapy? If not, why?
Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

Yes

Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Needs some language corrections before being published

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