Author’s response to reviews


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Author’s response to reviews:

Dear Editor:

We have enclosed a copy of our revised manuscript, titled "The effect of adjunctive intravitreal conbercept at the end of diabetic vitrectomy for the prevention of post-vitrectomy hemorrhage in patients with severe proliferative diabetic retinopathy: a prospective, randomized pilot study". We would like to thank the reviewers and the editor for their important and instructive comments. The manuscript has undergone a revision accordingly and the point-by-point response are listed on the following pages.

Thank you very much for your careful considerations. We sincerely hope that our efforts have resulted in a better presented manuscript that could be acceptable for publication in BMC Ophthalmology.

Sincerely,

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Point-by-point response to Referee(s)' Comments to Author:

Editor Comments:

As indicated by the reviewer, please incorporate your responses to the previous round of review into your manuscript text. In addition, please go over the CONSORT checklist and ensure that you have adhered to all the points of reporting and attach you fully completed checklist as a supplementary file to your revision. Finally, your manuscript still contains an unacceptable overlap in text with previous literature in many sections. Please go over the following text and rephrase it in original language: Lines 77-91, 239-253, 344-349, 357-366. To ensure a timely evaluation of your revision, please be specific about how and where you have changes your manuscript in your point-by-point response and cover letter.

Response: Thank you for your comments. I have gave my responses to the previous round of review into the manuscript text. I ensure that I have adhered to all the points of reporting. I have rephrased the text in original language according to your comments. Lines 80-93, 114-116, 137, 148, 169-171,203-214, 229, 280-284, 289-296, 327-335 have been changed. All the changes have been marked by using red color in the manuscript.

Reviewer reports:

David Steel, MD (Reviewer 1): The authors have answered my questions but they haven't added any of their details into the manuscript. The points I raised are all expected to be published in RCTs as per the Consort guidelines (http://www.consort-statement.org/) - so how the sample size was calculated, masking , randomisation methodology and timing as well as a CONSORT flow diagram - eg the authors say the patients were randomised pre op but then excluded if oil was used - the numbers should all be included in a flow diagram to show exclusions at these various points.
Response: Thank you for raising this question. When we started the pilot clinical trial, we planned to enroll 60 people, 30 in the control group and 30 in the injection group. Patients were assigned to different groups according to randomized table. The surgeon then performed the operation and whether injection or not at the end of the surgery based on the randomized results. Assessors were masked to group. However, proliferative diabetic retinopathy of the patients in our study were very severe. As a result, many of them undergone intravitreal injection of long-acting gas or silicone oil at the end of surgery and these patients had to be excluded. Meanwhile, due to lost to follow up, finally, only 30 people were included for statistics. In our opinion, although the sample size is small, the obtained data could provide a preliminary result in this pilot study. At present, this randomized and prospective study is still going on, and a more powered conclusion with large sample sizes, will be shared with you in the future. The flow diagram of enrollment has been shown in Figure 1 and the article has been revised accordingly. Lines 114-116, 137, 148, 169-171, 327-335 have been changed. All the changes have been marked by using red color in the manuscript.