Reviewer’s report

Title: HYPERHOMOCYSTEINEMIA IN BILATERAL ANTERIOR ISCHEMIC OPTIC NEUROPATHY AFTER CONVENTIONAL CORONARY ARTERY BYPASS GRAFT: A CASE REPORT

Version: 3 Date: 11 Aug 2017

Reviewer: Chaithra Aroor

Reviewer's report:

May I suggest some language corrections in the manuscript.

Might be interesting to investigate the potential benefit of homocysteine lowering in patients candidate to CABG: We would like to conclude with the hypothesis that it would be worthwhile to investigate the potential benefit of treating pre-existing hyperhomocysteinemia in patients undergoing CABG.

This part can be deleted: even in the absence of alteration of supra-aortic trunk echo-doppler and ophthalmic arteries perfusion.

Despite anti-aggregation, antithrombotic and vasodilator therapies were already ongoing, ten days after surgery the patient complained severe bilateral visual loss: In spite of ongoing anti-aggregation, antithrombotic and vasodilator therapy, ten days after the surgery, the patient complained of severe bilateral visual loss.

After 8 weeks funduscopic revealed bilateral temporal optic disc pallor without edema and a total visual field defect occurred in both eyes: After 8 weeks, funduscopic revealed bilateral temporal optic disc pallor without edema and a total visual field defect in both the eyes.

We know that there are predisposing ocular risk factors of AION as preexisting "disc-at-risk" configuration, but the presence of this configuration cannot be determined in a swollen or atrophic optic disc, and a vascular disorder of the optic nerve was not recorded in clinical history of our patient:, and a vascular disorder of the optic nerve was not noted in the clinical history of our patient.
Level of interest
Please indicate how interesting you found the manuscript:

An article of importance in its field

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

Needs some language corrections before being published

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