



SDI Review Form 1.6

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	2014_OR_14477
Title of the Manuscript:	Optovue Optical Coherence Tomography as an Imaging Modality for Scleral Thickness
Type of the Article	Original Research Article

General guideline for Peer Review process:

This journal's peer review policy states that **NO** manuscript should be rejected only on the basis of '**lack of Novelty**', provided the manuscript is scientifically robust and technically sound.

To know the complete guideline for Peer Review process, reviewers are requested to visit this link:

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PART 1: Review Comments

	Reviewer's comment	Author's comment (if agreed with reviewer, correct the manuscript and highlight that part in the manuscript. It is mandatory that authors should write his/her feedback here)
Compulsory REVISION comments	In the abstract and in the methods, you wrote about "precision and reproducibility". These data are completely missing from the results, moreover precision measurement is questionable in ophthalmology. Also correlation data to anatomic structure are mentioned, but missing from results. Please add these data with detailed statistical describing of the calculation method for reproducibility and correlation calculations. Page 6, line 777 "much more consistent". Where are the data? In the Table, the first 2 "patients" have unknown sex an age, with 6 measurements; others have 1-6 measurements. After it, you wrote that "An average of 3 measurements per location per eye was obtained". What is the explanation for this issue? If some subjects have only 1 measurement, how can you calculate reproducibility? Patients age (mean, SD) are not calculated, correlations between scleral thickness and age, other (mentioned) biometric factors are also not calculated.	1 - We agree and have removed the comments regarding precision and reproducibility, and correlation data to anatomic structure from the manuscript (Abstract and Methods section). 2 - We have deleted this text. 3 - We have deleted the first 2 patients from Table 1. All subjects had several scans; however, only those scans with clear boundaries between the sclera and conjunctiva were included for the measurement data. Thus, some eyes had more scans than others, but the average was 3 scans (lines 42-44). 4. We would be happy to provide correlations between biometric parameters (eg, age and gender) and scleral thickness; however, this was not the objective of the



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	Data of 16 eyes of 27 patients is a very small number, and inter-eye correlations can bias the data; so only data from one eye per one patients have to be used for statistics. Although the paper is interesting, the significant, mostly improper presentation of the methods and the results make this manuscript unsuitable for publication in its present form. In conclusion, after complete rewriting of methods and results (with increased number of subjects), the paper have to be re-reviewed.	study. We were not trying to correlate scleral thickness with age or gender; we are solely reporting the method of measuring the sclera. 5 - We understand that the number of eyes and patients is relatively small; however, we are only reporting the method in this manuscript and are not comparing data between eyes from the same patient (ie, no inter-eye correlations were assessed). 6 - We appreciate your helpful comments and hope that the changes described above and made in response to the other 6 reviewers are adequate for publication.
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<u>Minor</u> REVISION comments	Table 1 is unnecessary in its present form. In keywords, OCT is duplicated, and abbreviations are not permitted.	1 - We have simplified Table 1 to remove the 2 subjects of unknown age/gender and condense the presentation of the data. The mean scleral thickness and mean standard deviation values have been updated (lines 12-13 and 58-59). 2 - We have removed "OCT "from the keywords (line 18).
<u>Optional/General</u> comments	--	