

RETINAL NERVE FIBER LAYER CHANGES AFTER INTRAOCULAR SILICONE OIL TAMPONADE IN RHEGMATOGENOUS RETINAL DETACHMENT

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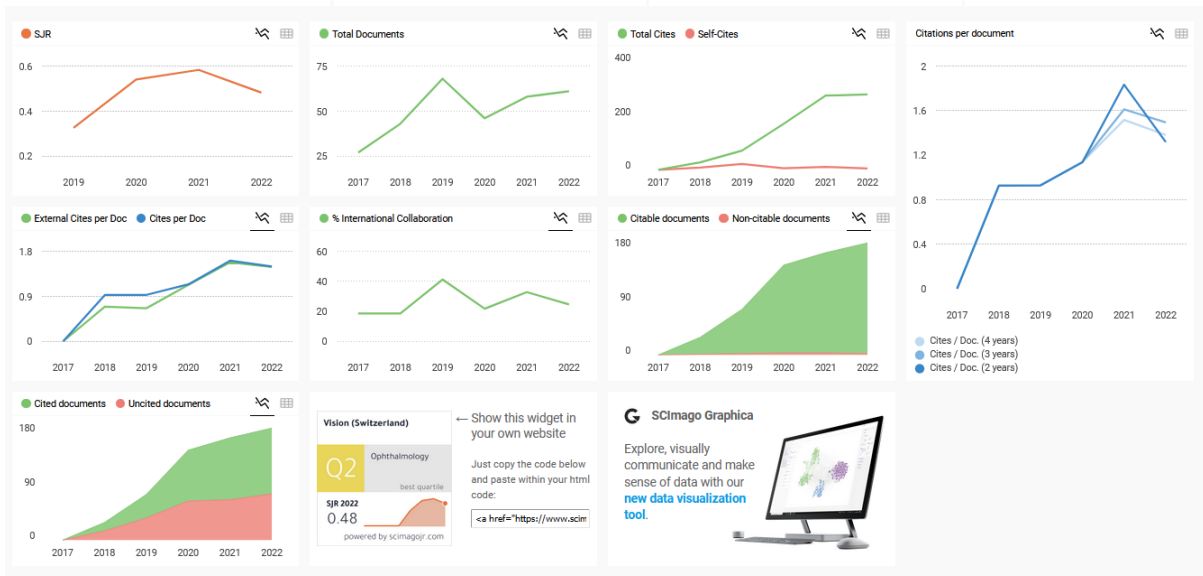
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Reviewer 1 Report

Comments on the article: Changes in the retinal nerve fiber layer after intraocular tamponade with silicone oil in rhegmatogenous retinal detachment

The work analyzes preoperative ocular variables and after silicone oil removal; in addition to measuring intraocular pressure, best corrected visual acuity, macular thickness, and nerve fiber layer thickness; The clinical characteristics of rhegmatogenous retinal detachments should be included for analysis, such as their location, extension, macular involvement, anteroposterior diameter of the eye, and mechanism of production of the detachment, since these factors could modify the outcome of the variables studied.

What was the medical criteria to indicate the removal of intraocular silicone oil?

What clinical characteristics did the patients treated with silicone for more than 6 months have?

Author Response

REVIEWER 1

Comments on the article: Changes in the retinal nerve fiber layer after intraocular tamponade with silicone oil in rhegmatogenous retinal detachment.

1. The work analyzes preoperative ocular variables and after silicone oil removal; in addition to measuring intraocular pressure, best corrected visual acuity, macular thickness, and nerve fiber layer thickness; The clinical characteristics of rhegmatogenous retinal detachments should be included for analysis, such as their location, extension, macular involvement, anteroposterior diameter of the eye, and mechanism of production of the detachment, since these factors could modify the outcome of the variables studied.

Response:

Thank you for your kind suggestion, our study did not measure the clinical characteristic of the RRD as mention above, because some of the characteristics already became our exclusion criteria. We realized that BCVA outcome is closely related to status of macula. Unfortunately, this study did not measure the relation between macular status on the baseline (pre-op) with the visual outcome. The purpose of our study is just to assess RNFL thickness changes in rhegmatogenous retinal detachment patients using SO tamponade and subsequent its removal, so we excluded any unrelated conditions that may cause bias for the measurement of RNFL thickness such as that have macular off or any kind of involvement of macula, traumatic history, etc (manuscript line 98-101 and 108-116).

2. What was the medical criteria to indicate the removal of intraocular silicone oil?

Response:

The criteria for oil removal in our study were:

1. Complete retinal attachment
2. Any signs of silicone oil emulsification

These statements are already written in our main manuscript line 117-120.

3. What clinical characteristics did the patients treated with silicone for more than 6 months have?

Response:

Decision for silicone oil removal based on the reattachment status of the retina. Most of patients were removed SO less than 6 months, but some of patients have prolong SO removal due to covid-19 lockdown regulation.

REVIEWER 2

It would be useful to supplement the discussion with electrophysiological findings (ERG) after SO application à Invest Ophthalmol Vis Sci. 1988 Dec;29(12):1881-4.

Response:

Thank you for your kind suggestion and information, we agree to your suggestion that ERG examination after silicone oil removal is may increase the value of this study, but unfortunately, we did not perform the ERG examination due to the lack of equipment facility in our hospital.

So, we added the ERG information in our discussion section (manuscript line 288-294).

Reviewer 3 Report

Authors presented an interesting analysis of INTRA-OCULAR SILICONE OIL TAMPONADE treatment . However, I feel figures are not clearly presented. Average values should be presented with standard deviation bars on figure 1. The groups in the table 2 (x vs y) are not clear, please present groups in more comprehensible way.

Thank You.

Author Response

REVIEWER 3

1. Authors presented an interesting analysis of INTRA-OCULAR SILICONE OIL TAMPONADE However, I feel figures are not clearly presented.

Response:

We have already added some explanations about the figures and tables in our manuscript (manuscript line 152-169).

2. Average values should be presented with standard deviation bars on figure 1.

Response:

Based on your suggestion, we have already added the standard deviation bars on all figures (manuscript line 152-169).

3. The groups in the table 2 (x vs y) are not clear, please present groups in more comprehensible way.

Response:

We have already removed the "X vs Y" statement from table 2. Basically, the meaning of x and y previously was to explain the comparison between each groups (Group 1: Pre-SO removal; Group 2: 1 week post SO removal; Group 3: 4 weeks post SO removal; Group 4: 8 weeks post SO removal). It shown in manuscript line 155-164.