

Review Form 1.7

Journal Name:	Journal of Advances in Medicine and Medical Research
Manuscript Number:	Ms_JAMMR_95984
Title of the Manuscript:	Evaluation of Meibomian Gland Dysfunction Before and After Surgical Correction of Cicatricial Entropion of the Upper Eye Lid
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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Review Form 1.7**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 1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript) 2. Is the title of the article suitable? (If not please suggest an alternative title) 3. Is the abstract of the article comprehensive? 4. Are subsections and structure of the manuscript appropriate? 5. Do you think the manuscript is scientifically correct? 6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form. (Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)	Yes Yes Yes Yes Yes	
Minor REVISION comments 1. Is language/English quality of the article suitable for scholarly communications?	Yes	
Optional/General comments	Abstract - methods - Assessment of dry eye- dry eye evaluation using TBUT and meibograph Results: The preoperative TBUT was insignificant between group A and group B (p=0.689). (Mention Mean postop tbut results instead of mentioning it after discussing about meibography) The preoperative meibography was insignificant between the group A and group B (p=0.992). The mean postoperative TBUT after 1month in group A was 8 ± 2.38 seconds while in group B was 8.50 ± 2.72 seconds with no statistically significant difference between the two groups (p=0.596). The mean postoperative meibography (meibomian gland dropout percentage) after 1month in group A was 51.27 ± 15.69 while in group B was 49.85 ± 19.19 with no statistically significant difference between the two groups (p=0.825). Conclusion- upper lid cicatricial entropion can be surgically treated by tarsal fracture technique (group a) or anterior lamellar reposition (group b). When patients with upper lid cicatricial entropion were evaluated for dry eye using TBUT AND MEIBOGRAPHY, pre and post operatively, no statistically significant difference in meibomian gland dropout was observed in group A and B. Infrared meibography is a good indicator of diagnosis of MGD.	

PART 2:

	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)
Are there ethical issues in this manuscript?	<i>(If yes, Kindly please write down the ethical issues here in details)</i>	

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