

Review Form 1.7

Journal Name:	Ophthalmology Research: An International Journal
Manuscript Number:	Ms_OR_99068
Title of the Manuscript:	Urrets-Zavalía Syndrome after Penetrating Keratoplasty: a case report
Type of the Article	Case study

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:

(<https://www.journalor.com/index.php/OR/editorial-policy>)

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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)
<p>Compulsory REVISION comments</p> <p>1. Is the manuscript important for scientific community? (Please write few sentences on this manuscript)</p> <p>2. Is the title of the article suitable? (If not please suggest an alternative title)</p> <p>3. Is the abstract of the article comprehensive?</p> <p>4. Are subsections and structure of the manuscript appropriate?</p> <p>5. Do you think the manuscript is scientifically correct?</p> <p>6. Are the references sufficient and recent? If you have suggestion of additional references, please mention in the review form.</p> <p>(Apart from above mentioned 6 points, reviewers are free to provide additional suggestions/comments)</p>	<p>Yes</p> <p>Yes</p> <p>Can add one sentence about what urrtes zavalia syndrome is</p> <p>Yes</p> <p>Yes</p> <p>Yes</p>	
<p>Minor REVISION comments</p> <p>1. Is language/English quality of the article suitable for scholarly communications?</p>	<p>Yes</p>	
<p>Optional/General comments</p>	<ul style="list-style-type: none"> The Urrets-Zavalía syndrome, which involves a lack of reflexes (fixed, dilated pupil, with iris atrophy and posterior synechiae) in the pupils followed by a gradual shrinking of the iris, has been observed as a potential consequence of penetrating keratoplasty, a procedure for a full thickness cornea transplant. It is frequently linked (associated) to ocular hypertonia <p>What was indication for keratoplasty? As its common post keratoconus pcp surgery. Post op vision of the patient after pcp not mentioned. Slit lamp examination- neo vessels- deep or superficial vascularization?</p> <p>Discussion- you can add ischemia of the iris and acute rise in IOP as possible underlying causes</p>	

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

Reviewer Details:

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