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## REVIEWER'S REPORT

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Date: 30/01/2025

**Title: "Comparative Study of Phaco-Trabeculectomy and Small Incision Cataract Surgery Trabeculectomy in Cataract Patients"**

### Recommendation:

- ✓ Accept as it is .....
- Accept after minor revision.....
- Accept after major revision .....
- Do not accept (*Reasons below*) .....

Rating	Excel.	Good	Fair	Poor
Originality		✓		
Techn. Quality	✓			
Clarity		✓		
Significance		✓		

Reviewer Name: Dr. S. K. Nath

Date: 31/01/2025

### Reviewer's Comment for Publication.

Overall, this is a strong and well-organized study with clear objectives, methodology, and results. The findings are statistically sound and clinically relevant. However, improving the language, increasing the sample size, extending the follow-up period, and including cost considerations would enhance the paper's quality.

### *Reviewer's Comment / Report*

#### Strengths of the Paper:

**1. Clear Research Objective and Justification:** The paper addresses an important ophthalmic issue-managing cataracts with coexisting glaucoma. The comparison of phaco-trabeculectomy (Phaco-Trab) and small incision cataract surgery trabeculectomy (SICS-Trab) is clinically relevant, as both are commonly used but have different risk-benefit profiles.

**2. Well-Defined Methodology:** The prospective, randomized study design adds credibility. Inclusion and exclusion criteria are clearly stated, ensuring patient selection is well-defined. Statistical methods (paired t-test, independent t-test, p-value < 0.05 for significance) are appropriate and help in drawing reliable conclusions.

**3. Comprehensive Data Presentation:** The paper includes detailed tables comparing intraocular pressure (IOP) reduction, visual acuity (VA) improvement, surgical time, and complications. The results are well-structured, making it easy to compare the two surgical techniques.

**4. Strong Discussion and Interpretation:** The discussion effectively explains why Phaco-Trab showed better outcomes in terms of IOP control, VA improvement, and fewer complications. The paper also acknowledges study limitations (small sample size, single-center study), which adds transparency.

## REVIEWER'S REPORT

**5. Conclusion is Well-Supported by Results:** The final recommendation in favor of Phaco-Trab is justified based on statistical findings. The study aligns with existing literature, as shown in the references section.

### Areas for Improvement:

**1. Language and Grammar Issues:** Some sentences need better structuring for clarity. Example:

- *“Phaco-trabeculectomy combines phacoemulsification and trabeculectomy, offering the advantage of minimal invasiveness and quicker recovery.”*
- Could be rewritten as:
- *“Phaco-trabeculectomy integrates phacoemulsification with trabeculectomy, providing minimal invasiveness and a faster recovery period.”*
- Minor grammatical errors such as missing articles (*“The phaco-trabeculectomy group had fewer complications”*, instead of *“Phaco-trabeculectomy group had fewer complications”*).

**2. Limited Sample Size:** 50 patients (25 in each group) is a relatively small sample, which may limit the statistical power of the findings. The study could benefit from a larger, multicenter trial to enhance generalizability.

**3. Lack of Long-Term Follow-Up:** The 6-month follow-up period provides useful insights, but long-term outcomes (e.g., 1-2 years post-op) would be beneficial in understanding the durability of IOP control and VA improvement.

**4. More Context on Economic and Accessibility Factors:** The study does not discuss cost-effectiveness or availability of surgical techniques in different healthcare settings. Since SICS is often preferred in low-resource settings, an analysis of cost and accessibility could improve the paper's impact.

**5. Figures or Graphs Would Enhance Readability:** The data tables are informative but could be supplemented with graphs or visual aids (e.g., line charts for IOP trends over time).