

REVIEWER'S REPORT

Manuscript No.: IJAR-55557

Title: Outcomes of cataract surgery in patients with Lens induced glaucoma : A clinical study on IOP control and Visual Prognosis

Recommendation:

Accept as it isYES.....

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: PROF. DR DILLIP KUMAR MOHAPATRA

Detailed Reviewer's Report

Title

Outcomes of Cataract Surgery in Patients with Lens-Induced Glaucoma: A Clinical Study on IOP Control and Visual Prognosis

1. Strengths

Clinically relevant topic

Lens-induced glaucoma (LIG) remains a preventable cause of blindness in developing countries, and the study addresses an important public health problem, particularly relevant to the Indian context.

Prospective study design

The prospective observational design adds strength to the reliability of clinical data collection and outcome assessment.

Clear objectives and outcomes

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The study clearly evaluates IOP control, visual prognosis, and postoperative complications following cataract extraction in LIG.

Well-defined inclusion and exclusion criteria

Excluding primary glaucoma and posterior segment pathology helps isolate the effect of lens-induced pathology on outcomes.

Detailed clinical data presentation

Comprehensive tables on type of LIG, IOP trends, visual acuity, duration of symptoms, and postoperative complications enhance clarity and readability.

Real-world applicability

Findings reflect real-world outcomes from a tertiary eye care center and are relevant to routine ophthalmic practice.

2. Weaknesses

Small sample size (n = 16)

The limited number of cases reduces statistical power and limits the generalizability of results.

Short follow-up duration

A 6-week follow-up may not adequately capture long-term visual outcomes, optic nerve status, or late postoperative complications.

Lack of statistical analysis

No inferential statistics (p-values, confidence intervals) are provided to establish significance between variables such as duration of symptoms, IOP levels, and final visual outcomes.

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Absence of surgical technique details

The manuscript mentions SICS as the gold standard but lacks details on surgical steps, intraoperative complications, and surgeon variability.

No comparison or control group

The absence of a comparator group (e.g., non-LIG cataract cases) limits interpretation of outcome differences.

Language and formatting issues

Minor grammatical errors, spacing issues, and inconsistent formatting are present and require editorial correction for journal submission.

3. Significance of the Study

The study reinforces the **importance of early cataract intervention** in preventing irreversible glaucomatous damage.

It highlights that **timely cataract extraction alone can effectively normalize IOP** in lens-induced glaucoma without the need for long-term anti-glaucoma therapy.

The findings underscore **female predominance and delayed presentation**, emphasizing socioeconomic and awareness-related barriers in rural populations.

The study supports SICS as a **cost-effective and effective surgical option** in managing LIG in resource-limited settings.

The work contributes **regional clinical data** that is valuable for ophthalmologists practicing in developing countries.

4. Key Points

Phacomorphic glaucoma is the most common form of lens-induced glaucoma.

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Majority of patients present late with very high IOP and poor vision.

Cataract extraction leads to **significant and sustained reduction in IOP**.

Better visual outcomes are associated with:

Early presentation (<1 week)

Lower preoperative IOP (<40 mmHg)

Absence of optic atrophy

Postoperative visual prognosis is mainly limited by optic nerve damage and corneal complications rather than persistent glaucoma.

Public awareness and early cataract surgery are crucial to prevent lens-induced glaucoma-related blindness.