



# Comparative efficacies of 13 surgical interventions for primary congenital glaucoma in children: a network meta-analysis of randomized clinical trials

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Dear Editor,

A recently published article titled ‘Comparative efficacies of 13 surgical interventions for primary congenital glaucoma in children: A network meta-analysis of randomized clinical trials’ caught our attention in the *International Journal of Surgery*<sup>[1]</sup>. This article is a network meta-analysis of randomized clinical trials (RCTs) on the efficacy of 13 surgical interventions for primary congenital glaucoma in children. The authors included 16 RCTs and reported 710 eyes of 485 participants and 13 surgical interventions, which formed a network of 14 nodes comprising both single interventions and intervention combinations. They found that illuminated microcatheter-assisted circumferential trabeculotomy (IMCT) is more effective than conventional partial trabeculotomy (CPT) and might be the most efficacious of the 13 surgical interventions for the management of PCG (primary congenital glaucoma). We appreciate the work of the authors, but there are some important questions that need to be mentioned with respect to the methodology of the systematic review.

First, in the search methods for identification of studies, the authors searched the Cochrane Central Register of Controlled Trials (CENTRAL) in The Cochrane Library, PubMed, and EMBASE from inception to 4 April 2022. However, the paper was published in March 2023, and an update of the search date was needed to find new published related studies before the manuscript was accepted. In addition, an important database was missed in the Web of Science when the systematic research was conducted.

Second, almost half of the included studies were from Egypt, which can result in publication bias in the meta-analysis results.

In addition, the authors did not construct a funnel plot for the assessment of publication bias<sup>[2]</sup>.

Third, only 16 studies were included, and the number of studies included was insufficient for such a network meta-analysis, allowing the level of evidence in the study to decrease<sup>[3]</sup>.

Overall, the network meta-analysis included an insufficient number of studies for analysis, and defects in the search method may have lowered the quality of the research evidence.

## Ethical approval

Our submitted manuscript does not involve any patients without the ethical approval document.

## Consent

Our submitted manuscript does not involve any patients without the written informed consent documents.

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## Author contribution

N.F. and L.Y.: equally participated in the original idea and writing the first draft; M.L. and S.L.: edited the final manuscript. All authors approved the last version of this manuscript.

## Conflicts of interest disclosure

There are no conflicts of interest among the authors.

## Research registration unique identifying number (UIN)

None.

## Guarantor

Shouqing Li.

## Data availability statement

The supporting data used in the paper can be obtained via the requirement from the author Shouqing Li.

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