Dear Sir,

We thank the reader for raising queries and the editor for giving us the opportunity to respond to these queries.^[1]

Please find each query and its reply;

Question 1: Randomization: Allotment and masking? Whether surgeons chose their anesthesia.

Answer 1: The randomization schedule for each surgeon was generated by EpiTable software for 1000 cataract surgeries.^[2] Each patient was randomly assigned to either topical or peribulbar route of anesthesia by opening an envelope on entering the recovery (preanesthetic) room. Patients were explained about both the routes of anesthesia, and that they would undergo cataract surgery by use of any one of these two routes. A written informed consent was obtained. Patients refusing to consent were excluded from the study. The randomization was not equal due to surgeons not being present in operation theater at times, patients refusal, and patients who could not bear topical anesthesia.

Question 2: Time of surgery?

Answer 2: In peribulbar group, the surgery was done about 7–8 min after injection; in topical group, the drops were instilled 5 min before surgery and repeated just before commencing surgery.

Question 3: Conjunctival congestion more in peribulbar?

Answer 3: Subconjunctival hemorrhage occurring in the topical group was mainly due to forceps trauma in few cases with poor akinesia led to conjunctival congestion. They were more in topical anesthesia group.

Question 4: Visual acuity why after 4–6 weeks? Few hours more imp

Answer 4: Day 1 visual acuity comparison was done with respect to surgeons and cataract grade and day 1 visual acuity did not differ significantly in the two groups. However, cases of the topical group are having better vision but the difference was not statistically significant.

Question 5: Pain Scale: Likert scale? Purely subjective? Intraoperative discomfort more in peribulbar group? How was it asked? Answer 5: Pain score grading was done using a scale wherein patients were asked to grade score of the pain on a scale of 1–10. It was subjective in nature. We inquired about intraoperative discomfort soon after completing the surgery. Intraoperative discomfort more in peribulbar group. We have not mentioned this in the paper.

We agree with the observations made that topical anesthesia is suitable to a certain group of patients, and that is the reason we had certain inclusion and exclusion criteria.

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Conflicts of interest

There are no conflicts of interest.

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Reference

- Dole K, Kulkarni S, Shisode KD, Deshpande R, Kakade N, Khandekar R, *et al.* Comparison of clinical outcomes, patient, and surgeon satisfaction following topical versus peribulbar anesthesia for phacoemulsification and intraocular lens implantation: A randomized, controlled trial. Indian J Ophthalmol 2014;62:927-30.
- Dean AG, Sullivan KM, Soe MM. OpenEpi: Open Source Epidemiologic Statistics for Public Health, Version. www.OpenEpi. com, updated 2015/05/04, [Last accessed on 2015 Dec 01].

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