

Peer Review File

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Reviewer A

Comments:

Congratulations to the authors - this is a great manuscript.
Well done.

Response:

Thank-you for your kind review of our manuscript. We greatly appreciate the time you have taken to review our article.

Reviewer B

Comments:

Comment 1:

Can the authors please clarify why they limited the sample size to 12?

Response:

A further statement was added to methods (line 127) as well as to the results section 169-171. "This exploratory study utilised a convenience sampling, which obtained wax from twelve patients which was comparable to previous studies in sample size (13,14,16). Exploratory research was conducted as a number of agents used in this study have not been investigated in prior studies."

Comment 2:

Do they recommend different agents for wax of different consistencies?

Response:

I have adjusted the statement in our discussion which now reads- The results of this study showed a similar effectiveness and no statistically significant difference with agents against soft, medium and hard cerumen consistencies. Line 262-263.

Comment 3:

Based on their results, can they make any recommendation apart from sterile water, which as they say has a risk of infection with prolonged use, the next most effective and cost effective agent to use?

Response:

An adjustment has been made to the discussion. Excluding sterile water, when evaluating the other water based agents, there was no statistically significant difference observed. There is similar effectiveness of the other waterbased preparations and more readily available agents included Waxsol® and hydrogen peroxide. (Line 303-305).

We have adjusted the conclusions to reflect these changes also- While there are a growing number of over-the-counter, relatively expensive agents on the market, none in this study were more effective than sterile water. However, due to potential increased risk of otitis externa, further in-vivo studies are required. The authors have concluded for everyday practice, oil based agents should be avoided and any of the water-based cerumenolytics, including Waxsol® and hydrogen peroxide, would be the next best treatment regardless of cerumen consistency. Line 325-330.

Thank-you kindly for your careful consideration of this paper.