In this study, authors reported the correlation of relative telomere length (RLT) and the severity of age-related macular degradation in Russian population. However, the article is not well-organized and have numerous typos or mistakes required correction.

Below are the general comments:

1. In terms of writing, there are two points could be corrected to improve the article.
    a. First, every abbreviation needs to be described when it is used in the first time and consistently used the abbreviation in the following paragraph. For example, in line 12, AMD was not described. So did "OR" in line 19.
    b. Second, the decimal point. The decimal point should be ".". in the article, the authors intend to use comma instead of decimal point, which need to be corrected.

2. In the result tables and figures, the legends have mistaken in multiple sites, please check thoroughly.
    a. The description under the table 1 is the "Descriptions for Table 2". Moreover, the statement "P value is greater ≤ 0.05" is confusing.
    b. The legend of Figure 1: There is no Model 4 in the figure.
    c. Table 4: there are no star mark in the Table.

3. In the introduction part, the author need to provide more information such as, the known risk factors of AMD (assume are the factors in table 1, but not described in the text yet), the correlation of AMD and previous reported markers.

4. The study established 5 model to analyze the correlation between AMD and the related factors. However, the model 4 was loss and only described "the program made a mistake" what is the mistake leads to the exclusion of this model need to be specifically described.

5. The models which adjusted different factors in inconsistent between the Table 2 and Figure 1. Please check if it is typo, or the analysis is different. Is the latter is the situation, the result writing should be separated.

6. In the results, some parameters does not described clearly, for example, what is the sensitivity and the specificity? what is the compared group of the p value in Table 3? The detailed of these parameters are required.

7. In table 3, the sample is based on number of eyes. However, the telomere length is analysis from the buccal epithelial cells. Therefore, the n number must not be the same.

How do you deal with the patient with AMD in 2 eyes? Also, the n number seems controversial with the “two-eye design” in line 198.

8. In Figure 2a, what is the AREDS 0, in the text, only AREDS 1-4 are mentioned, please check and reorganized. In Figure 2b, what is the dots in the figure mean? The n numbers you mentioned in Table 3 are way more than the dots on the Figure 2b, please describe clearly for the meaning of these dots.

9. in the telomere biology, RTL have less correlation with other telomere length measurements such as the gold-standard Telomere Restriction Fragment (TRF) assay, quantitative-FISH, flow-fish and ddPCR based measurements. Do you have any data prove that the RTL assay is correlate to other telomere length measurements?

10. In the conclusion, the authors stated that the results showed that RTL can be used as a molecular marker as the individual prognosis criterion. The statement over-stated the results. The results only comes from one time point, which cannot rule out the individual variation. The statement needs to be polished.

Here are some comments directly to the specific point.

1. Line 46, the telomere sequence for human should be “TTAGGG”.
2. Line 48-52 Beside replication error the author mentioned, telomere length also shortens in normal health cells due to the mechanism of DNA polymerase which will not replicate the very end of chromatin. The mechanism is better mention in the paragraph.
3. Line 126 and line 127 there are two sentences with the same meaning.
4. Line 150, the authors stated “… in patients with early AMD can more accurately predict the progression…” the sentence is vague. What marker you are comparing to the telomere length?