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EDITORIAL

Issue 6 at a glance:

From the many valuable studies conducted by Turkish ophthalmologists, for this issue we have chosen six original research articles, one review and three case reports that we feel will benefit our national and international readers.

Demir et al. compared retinal nerve fiber layer (RNFL) and ganglion cell complex (GCC) thickness measurements from pattern electroretinogram (PERG) and fourier-domain optical coherence tomography (FD-OCT) with visual field (VF) analysis and evaluated correlations between these variables in patients with early primary open-angle glaucoma (POAG) and ocular hypertension (OHT). They found that GCC is at least as reliable as RNFL in early diagnosis of early POAG and that the two have a high level of correlation. They also report that ganglion cell function loss can be detected earlier in OHT patients using PERG amplitude analysis.

Several studies in recent years have demonstrated the emergence of fundus autofluorescence imaging methods among the many other methods employed in the diagnosis and following of age related macular degeneration (AMD). Olcay et al. compared the sensitivity of blue-light fundus autofluorescence (FAF) and near-infrared autofluorescence (NI-AF) in the evaluation of macular lesion progression rates in dry AMD. They concluded that NI-AF imaging is at least as important and effective as FAF in monitoring dry AMD.

Pekel et al. did a comparison of macular thickness, peripapillary retinal nerve fiber layer thickness, choroid thickness and retinal vessel caliber measurements on spectral domain optical coherence tomography (SD-OCT) in operated and healthy patients in order to evaluate late postoperative posterior pole retinal and choroidal changes in eyes that underwent primary suture for traumatic corneal perforation. They found no significant differences in the studied variables between the group of perforated eyes and the healthy eyes.

Altıparmak et al. evaluated the intra- and inter-observer agreement of anterior segment measurements of normal eyes taken with the Galilei double Scheimpflug analyzer, which has two rotating Scheimpflug cameras as well as a Placido topography system. The parameters studied were total and posterior corneal strength; corneal higher order wavefront aberrations (6.0 mm pupil); central, paracentral and peripheral pachymetry; and anterior chamber depth. The authors concluded that anterior segment parameter measurements done with the Galilei system are consistent, and that the Galilei system is reliable for use in routine clinical applications and research.

Duman et al. investigated the demographic and ophthalmologic characteristics of patients in the Mediterranean region of Turkey with 'double-headed pterygium' and retrospectively evaluated their surgical outcomes. The authors state that the surgical method they employed, taking one piece from the upper bulbar conjunctiva and bisecting it for use as an autograft without the use of an agent to prevent recurrence, is a good choice for pterygium located on both sides of the cornea.

Turan et al. analyzed surgical outcomes in secondary sensory strabismus and evaluated the effect of visual acuity on surgical success. Their analysis included the medical records of sensory strabismus patients who underwent recession-resection surgery on the eye with vision loss only, and they evaluated surgical age, visual acuity, etiology of vision loss, pre- and postoperative deviation angles, follow-up time and surgical outcomes. They defined surgical success as ≤ 10 prism diopters and found that in sensory strabismus, good visual acuity was associated with higher surgical success in the long term.

Retinoblastoma is the most common intraocular tumor in pediatric patients. In their review of current chemotherapy approaches in retinoblastoma, Yanık et al. discuss the use of traditional methods like enucleation and external beam radiotherapy, but emphasize chemotherapy as the eye-conserving method most commonly used today. The authors describe the various delivery methods of chemotherapeutic agents-systemic, subconjunctival, intra-arterial and intravitreal-and the use of systemic therapy to shrink tumors in order for local treatment methods to be applied (chemoreduction) or lower the high risk of metastasis after enucleation (adjuvant therapy).

Pseudoxanthoma elasticum (PXE) is a multi-systemic, genetic disorder that affects the skin, cardiovascular system and eyes. The most important finding of PXE in the fundus is angiod streaks. Other important ocular findings include peau d'orange, optic disc drusen, pattern dystrophy appearance, comet lesions and choroidal neovascularization. Comet lesions are pathognomonic for PXE patients. Tatlıpınar et al. present two cases exhibiting the unique PXE finding of comet lesions.

Çelik et al. share two cases with no history of elevated blood pressure prior to pregnancy who presented to emergency services with hypertension and visual complaints; one was diagnosed with severe preeclampsia, the other with HELLP (Hemolysis-Elevated Liver enzymes-Low Platelets) syndrome. In their report, they describe the patients' various ocular findings including serous retinal detachment (SRD) and macular hemorrhage due to disrupted retinal and choroidal circulation; the management and spontaneous resolution of their conditions; and the need to seriously evaluate postpartum hypertension and visual symptoms.

Afrashi et al. report the case of a 57-year-old female patient who presented with low vision and burning in the right eye; OCT imaging revealed the presence of a stage III full-thickness macular hole. Pars plana vitrectomy was performed, followed by long acting gas tamponade (C3F8), but 30 days after surgery the macular hole had not closed. Another operation was planned, but the patient elected to delay the procedure due to personal reasons; interestingly, the macular hole closed eight months after surgery without further intervention.

Sincerely on behalf of the Editorial Board,
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