Esteemed colleagues,

This issue of our journal features eight original research articles, one review, and two case reports that we hope will provide interesting reading and useful information.

Sarcoidosis is a systemic disease of unknown etiology characterized by the presence of non-caseifying granulomas. The diagnosis of sarcoidosis is often complicated by the fact that symptoms may be absent or variable. Sarcoidosis-induced granulomatous inflammation can involve all ocular structures, resulting in ocular sarcoidosis, which is one of the most serious complications and has a prevalence ranging from 13% to 79%.

Ermiş et al. conducted a study evaluating sarcoidosis-induced tear film and ocular surface changes with subjective and objective diagnostic tests, especially conjunctival impression cytology (CS), in comparison with healthy individuals. Their analysis of clinical data from 57 right eyes of 57 sarcoidosis patients without ocular involvement (Group 1) and 33 right eyes of 33 healthy individuals with similar demographic characteristics (Group 2) showed that sarcoidosis patients had significantly higher IS scores according to the Nelson grading system, as well as a significantly higher percentage of dry eyes as assessed by tear film break-up time and Ocular Surface Disease Index (See pages 200-205).

Eroğul et al. evaluated the fitting process, clinical performance, and patient satisfaction of hybrid contact lenses (HCL) in patients with keratoconus (KC). In their study including 110 eyes of 68 KC patients (35 females, 33 males) prescribed HCLs, corneal topography parameters, best corrected visual acuity (BCVA) with glasses, number of HCL trials, base curve of the prescribed HCL, and BCVA with the HCL were recorded from the patients’ files, and a contact lens satisfaction questionnaire was sent to the patients via email or WhatsApp. It was found that the base curve values of the prescribed HCLs were very close to the topographic Kmean value, fitting was successful for most patients in the first or second trial, and the patients’ general satisfaction was moderate to good (See pages 206-212).

Ultrasound biomicroscopy (UBM) is high-frequency B-mode ultrasound that allows microscopic imaging of the anterior segment, pars plana, and peripheral retina. UBM enables detailed visualization of the posterior iris, posterior chamber, ciliary body, zonules, and the relationships among all of these structures, which cannot be visualized biomicroscopically. Bicer and Hosal retrospectively reviewed the UBM records of 1256 eyes of 917 patients and observed that the most common indications for UBM were to investigate the presence of glaucoma, especially plateau iris, and to evaluate iris and ciliary body masses. They noted a marked decrease in the use of UBM to evaluate corneal, conjunctival, and lens pathologies after the introduction of anterior segment optical coherence tomography (OCT). The authors emphasized that UBM can be used to understand the pathophysiology of anterior segment diseases and for clinical evaluation, surgical treatment planning, and assessment of the outcomes (See pages 213-217).

In a study to determine the distribution of Chlamydia trachomatis serotypes in patients with follicular conjunctivitis in Iran, Abedifar et al. analyzed C. trachomatis positivity with polymerase chain reaction (PCR) analysis in a total of 68 conjunctival samples obtained from symptomatic adults and reported that C. trachomatis was detected in 38 patients with follicular conjunctivitis (55.9%), the prevalence of C. trachomatis was higher in young age groups, and 26 patients (38.2%) had a history of urinary tract infection. Molecular genotyping identified four different serotypes in the conjunctival samples, with the most common serotype being E, followed by G, I, and F (See pages 218-221).

Acar et al. evaluated the clinical features, imaging findings, and treatment approaches of cat scratch disease (CSD) with ocular involvement in their study including 23 eyes of 19 patients, which is the largest case series reported in Türkiye. In addition to the classic appearance of neuroretinitis and macular star, the authors emphasized that the disease can also cause isolated optic disc edema, branch retinal artery...
occlusion, and retinal infiltrations, and that CSD should be considered, history of cat contact should be questioned, and Bartonella serology should be investigated in the differential diagnosis of patients presenting with these signs (See pages 226-233).

Myelinated retinal nerve fiber (MRNF) is a developmental anomaly that appears as gray-white striated patches corresponding in shape to the distribution of the retinal nerve fiber layer. In their study investigating the macular imaging characteristics of patients with unilateral MRSL and high myopia syndrome, Sariğül Sezenöz et al. assessed 6 patients and 13 myopic controls using spectral domain (SD)-OCT, SD enhanced depth imaging (EDI) OCT, and OCT angiography (OCTA) imaging and showed that the prevalence of posterior vitreous detachment was significantly higher in myelinated eyes, and all patients had normal foveal contour, macular structure, and OCTA characteristics except for a higher acircularity index (See pages 234-240).

Karamert et al., conducted a study investigating the factors associated with strabismus and the relationship between strabismus and macular ectopia in patients with retinopathy of prematurity (ROP). The 206 ROP patients included in the study were grouped as those with spontaneous regression (Group 1, n=45), those who underwent laser therapy (Group 2, n=70), and those who underwent surgical treatment (Group 3, n=91). The authors concluded that the prevalence of anisometropia, amblyopia, nystagmus, macular ectopia, and retinal pathologies causing vision loss were higher in Group 3; macular ectopia, retinal pathologies, and amblyopia were the strongest risk factors for the development of strabismus in ROP patients; and disc-to-fovea distance was high in the majority of exotropic patients (See pages 241-246).

Pseudoexfoliation syndrome (PES) is one of the most common causes of open-angle glaucoma, and pseudoexfoliation glaucoma is associated with a higher risk of blindness, higher intraocular pressure (IOP) at diagnosis, and wider range of IOP fluctuation compared to primary open-angle glaucoma. Patients with PES are ten times more likely to develop glaucoma than the normal population. In this issue’s review, Yüksel and Yılmaz Tuğan present our readers with current information about the clinical features, treatment, and systemic signs associated with pseudoexfoliation glaucoma (See pages 247-256).

Şimşek et al. present a patient with bilateral primary open-angle glaucoma who underwent cataract extraction with intraocular lens implantation and excisional goniotomy with the Kahook Dual Blade and developed reduced visual acuity and hypotony due to a cyclodialysis cleft, which was resolved with 3 sessions of argon laser photoagulation. With this case, the authors pointed out that eyes with postoperative hypotony may have a cyclodialysis cleft and that argon laser photoagulation is an effective method for treating small clefts (See pages 257-256).

Köksaldı et al. present a patient who underwent a single session of 21 Gy CyberKnife stereotactic radiotherapy (SRT) for choroidal malignant melanoma, developed a unilateral multiple evanescent white dot syndrome (MEWDS)-like reaction associated with tumor necrosis caused by CyberKnife SRT 11 months after treatment, and was treated with 2 intravitreal dexamethasone implants, thus pointing out the possibility of a MEWDS-like reaction occurring after radiation therapy (See pages 261-265).

We hope you will find the articles featured in our fourth issue of this year interesting and guiding in your professional practice.

Respectfully on behalf of the Editorial Board,
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