

TURKISH JOURNAL OF OPHTHALMOLOGY



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EDITORIAL

2016 issue 6 at a glance;

The final issue of 2016 contains 6 original articles, 3 case reports and a review for your reading pleasure.

In the third issue of 2016, Elgin et al. reported that greater anterior chamber deepening after cataract surgery in eyes with pseudoexfoliative glaucoma than in eyes with open-angle glaucoma without pseudoexfoliation syndrome. In this issue, Güngör et al. report their study in which they compared anterior chamber depth before and after cataract surgery in 22 eyes with pseudoexfoliation syndrome and 30 age-matched non-pseudoexfoliative eyes. They found that anterior depth increased by 0.46 mm in the pseudoexfoliation group versus 0.12 mm in the eyes with non-pseudoexfoliative cataract, a statistically significant difference. Their results add to the growing body of evidence supporting the need for approaches that take pseudoexfoliation into account in the formulas used to calculate intraocular lens power after cataract surgery.

The instruments available for measuring anterior segment structures continue to grow in number. Polat et al. evaluated the agreement between two of these devices, the Aladdin Paptic Biometer and the Sirius Corneal Topography system. Although measurements were strongly and significantly correlated, they observed significant differences in parameters like anterior chamber depth and K1 keratometric axis. This highlights the importance of being aware of these types of measurement variations in values obtained using different instruments when comparing case series in the literature.

Arıkan et al. report that in the insulin resistance phase, a stage in which patients are not yet expected to develop diabetic retinopathy, ganglion cell/inner plexiform layer thinning can be detected by optical coherence tomography prior to the development of functional loss manifesting as reduction in contrast sensitivity. It is beyond doubt that the ability to detect neural damage by noninvasive morphologic examination before functional losses occur is extremely valuable in order to prevent irreversible damage.

Aydoğan et al. followed 6 eyes of 5 patients with type 2 idiopathic macular telangiectasia for an average of 26 months and reported improved visual acuity and reduced central macular thickness in all cases. The increasingly popular anti-VEGF therapeutic agents seem to also have noteworthy utility in idiopathic macular telangiectasia.

Güngör et al. evaluated the presence of split nerve fiber bundles, which can mimic retinal nerve fiber layer (RNFL) loss, in 718 eyes of 359 normal, healthy eyes using spectral-domain optical coherence tomography. This study notably demonstrates that we should be cautious about labeling normal

variations revealed by our increasingly sensitive diagnostic instruments as pathologic. For patients whose optic disc appears normal and healthy on examination, especially cases where superior RNFL defects are seen on the RNFL deviation map, it is recommended to carefully analyze the RNFL thickness map and graph to detect split nerve fiber bundles.

Basal cell carcinoma (BCC) is the most common cutaneous tumor, and does not show metastasis to distant organs. Şahan et al. performed frozen section controlled excision in 35 eyes of 35 patients whose BCC recurred following a previous excision with visually determined surgical margins. They authors determined that frozen section may need to be repeated between 1 and 4 times per surgery and reported that the procedure was effective, resulting in a fairly low rate of re-recurrence, 5.7%, over the average follow-up period of 4.3 years.

This issue's review by Başar and Arıcı looks at the full range of esthetic and functional indications for the ophthalmic use of botulinum neurotoxin. We believe its inclusion of nearly the entirety of the recent relevant literature and its thorough description of the types of botulinum neurotoxin and clinically important details such as preparation and application methods make this review a valuable reference text.

Derişoğulları et al. share a case of Schwannoma in a rare clinical presentation: an isolated Schwannoma at the eyelid margin. Their case expands the differential diagnosis for eyelid margin tumors.

In their case report, Ünsal et al. document the possibility that Arruga sutures used for scleral buckling may cause intraocular invasion many years later and state that preventative measures should be taken against potential complications of procedures like cataract surgery in these patients. Their report brings a new awareness of medical implants and their long-term complications.

Cebeci et al. present 3 eyes of 2 patients diagnosed with focal choroidal excavation, a relatively rare entity that can be diagnosed using optical coherence tomography, and report the follow-up and treatment options.

Finally, in a letter to the Editor, Şekeroğlu et al. share their "basic algorithm for the molecular diagnosis of genetic eye diseases", prepared from an ophthalmologist's perspective, which they believe will save money and time, as well as lead to practical advances in diagnosis and treatment.

Respectfully on behalf of the Editorial Board,

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